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STAFFORDSHIRE COUNTY COUNCIL

Annual Report

OF THE

MEDICAL OFFICER of HEALTH W. D. CARRUTHERS, M.B., D.P.H.

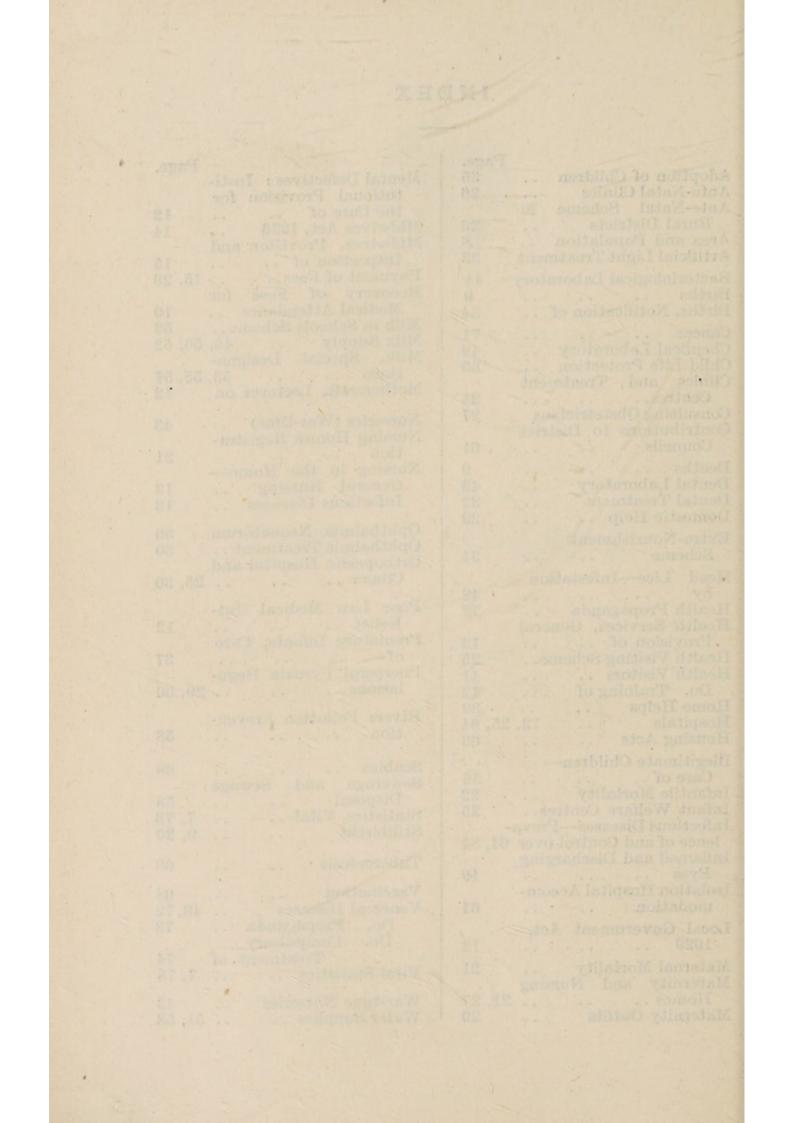
For the Year 1945

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		Page.
Adoption of Children		35
Ante-Natal Clinics		26
Ante-Natal Scheme	in	
Rural Districts		26
Area and Population		8
Artificial Light Treatm		32
Bacteriological Laborat	tory	
Births		9
Births, Notification of	••	34
Cancer		71
Chemical Laboratory		49
Child Life Protection	.:	35
Clinics and Treatme	ent	25
Centres Consulting Obstetrician		25 27
Contributions to Dist		41
Councils	. ico	61
		9
Deaths Dental Laboratory	• •	43
Dental Treatment		
Domestic Help		39
		00
Extra-Nourishment Scheme		34
		, 0±
Head Lice-Infestatio		10
by Health Propaganda	• •	$\frac{42}{72}$
Health Services, Gene	oral	12
Provision of	crar	12
Health Visiting Schem	e	25
Health Visitors		41
Do. Training of		42
Home Helps		39
Hospitals	12,	25, 64
Housing Acts	• •	63
Illegitimate Children-	-	
Care of		36
Infantile Mortality		22
Infant Welfare Centre		25
Infectious Diseases-P		
lence of and Control o Inflamed and Discharg		04, 04
		19
Eyes Isolation Hospital Acc	om-	10
modation		64
Local Government A	et.	
1929		12
Maternal Mortality		21
Maternity and Nur	sing	21
Homes	Sing	21, 27
Maternity Outfits		29

	Page.
Mental Defectives : Insti-	
tutional Provision for	
the Care of	12
Midwives Act, 1936	14
Midwives, Provision and	
Inspection of	15
Inspection of Payment of Fees	15, 29
Recovery of Fees for	
Medical Attendance	19
Milk in Schools Scheme.	56
Milk Supply 46, Milk, Special Designa-	50, 52
tions 52	
tions 53, Mothercraft, Lectures on	00, 01
nothercraft, Lectures on	42
Nurseries (War-time)	43
Nurseries (War-time) Nursing Homes Registra-	10
tion	21
Nursing in the Home-	
General Nursing Infectious Diseases	13
Infectious Diseases	13
Ophthalmia Neonatorum	30
Ophthalmic Treatment	30
Orthopædic Hospital and	05 00
Clinics	25, 30
Poor Law Medical Out-	
Poor Law Medical Out- Relief	12
Premature Infants, Care	
of	37
Puerperal Fyrexia Regu-	
lations	20, 30
D' D.U. C	
Rivers Pollution Freven-	
tion	58
Scabies	00
Sewerage and Sewage	68
Disposal	58
Disposal Statistics, Vital Stillbirths	7, 78
Stillbirths	9, 20
	0, 20
Tuberculosis	68
and the second se	
Vaccination	68
Venereal Diseases Do. Propaganda	48,72
Do. Propaganda	73
Do. Compulsory	
Treatment of Vital Statistics	$74 \\ 7, 78$
vital statistics	1, 10
War-time Nurseries	43
Water Supplies	51, 58



STAFFORDSHIRE COUNTY COUNCIL

Annual Report of the Medical Officer of Health

PRELIMINARY NOTE.

The Annual Report for 1945 is later in being issued than has happened in any previous year and there are many sound reasons why this has occurred. The most interesting reason is the time devoted in the past year to the preparation of schemes under the National Health Service Act, 1946, but, though one is tempted to discuss these matters, the substance of the Report relates to the state of the public health during a definite period and comment must be limited to that period.

In the Report it will be seen that the live birth rate showed a decline of 9 per cent. on the previous year and one wonders if this is a continuation of the decline in the rate noticed since the early part of this century and interrupted during the war. It remains, however, higher than the average for England and Wales and the death rate is below the national average.

It is gratifying to record in general a further decline in the incidence of infectious disease, particularly diphtheria, though the tuberculosis death rate is an exception and shows a slight increase. It is very unsatisfactory to observe the continued increase in the incidence of dysentery, which has been increasingly prevalent each year since the beginning of the war. Doubtlessly this is due to the increased habit of communal feeding and, in the large majority of instances, to lack of ordinary cleanliness in the preparation of food at those places. It is a reflection on the instruction that people receive in elementary cleanly habits, causing illness which is easily preventable.

Owing to the age of the population it causes no surprise that the diseases common amongst the higher age groups have increased, and the number of deaths from cancer is the highest recorded in the County. One hopes the position will improve when the future schemes for the early detection and treatment of cancer come into operation.

The fall in the birth rate has resulted, naturally, in fewer calls on the services of midwives and the average number of cases attended by each whole-time midwife fell by ten. In the urban districts this fact mitigated the shortage of midwives, but it is interesting to observe that twenty midwives notified their intention to practise and did not conduct a single confinement during the year.

Building and other difficulties made it impossible to proceed with the County Scheme for increasing the number of beds available for Maternity Home confinement, except in the maternity units at the Public Assistance Institutions. Because of these additional beds the number of confinements for which the Health Committee was responsible at Institutions was 682 (465 more than for the previous year). This greatly relieved the previous shortage in accommodation, so much so it can definitely be recorded that no woman was refused a bed who lacked sufficient home help or space, or where the house was otherwise unsuitable. Also, in every case where specialist treatment was indicated, it was provided. Though possibly the maternity units at the Public Assistance Institutions would not have been the first choice of many of the women, the accommodation, and the care given, were of a very high standard.

It is fair comment that the same high standard was attained also in the domiciliary deliveries, for the proportion of women suffering from puerperal sepsis over the whole County Area was less than in the previous year, and the infant mortality fell to the lowest figure recorded in the County, that is 47.

It is remarkable that a high proportion of ante-natal dental treatment is neglected by women. Further efforts must be made to improve this, as has been taking place in the case of the children. Without doubt there has been a big improvement in the condition of the teeth of the "under fives", for whereas prior to 1939, 63 per cent. required radical and urgent treatment, in the year under review only 40 per cent. required attention, and that of a much less radical nature.

Following the issue of Circular 20/44 by the Ministry of Health a scheme for the care of premature babies was introduced during the year and details of this are given in the appropriate section.

The shortage of Health Visitors remained a problem and a valuable step towards its solution was taken when the Committee decided to pay the cost of training nurses for the Health Visitors' Certificate. It may be said now that this has proved a valuable means of recruitment and a number of nurses willing to train has been appointed. It is of great importance to maintain the strength of this staff, who are encouraging the prevention of illness in the homes.

Four day nurseries were closed during 1945, leaving seven still open. While the closure of some of them is to be regretted, they have not been sufficiently used to justify the number of staff employed.

Though the increased consumption of milk in the country is striking it is to be regretted that the standard of cleanliness of the milk is not high. As regards street samples, it will be noted that 23.3 per cent. of undesignated milks were found to be unclean, and 19.6 per cent. of specially designated. The results of the examinations of designated milks taken at the farms showed that 10.9 per cent. of the "Tuberculin Tested" and 17.3 per cent. of the "Accredited" failed the cleanliness test. It would seem that the additional financial inducement to the farmers to produce clean milk has been only partially successful, and while the difficulties of labour and shortages of material are recognised, it appears from the reasons given when milk samples failed to pass the test that the premium is regarded by some producers as an additional income and ought to continue even if the milk is impure.

At last it is becoming possible for schemes to provide and increase water supplies and sewerage and sewage disposal schemes to materialise. Though the scope must remain limited for a long time some work has been started. The needs of the County will be well met when present plans can be executed and the same may be said as regards the new Health Schemes for the County. It is with impatience that one awaits the time when the present restrictions will have ceased to hold back the improvements which are urgently needed and ready to be made.

SUMMARY OF STATISTICS.

1.—GENERAL STATISTICS.

Area of Administrative County									
Diseases)									
Rateable Value at 1st April, 1945 (General County Purposes)£3,458,339									
Estimated net product of a penny rate, 1945-46 (General County Purposes) £13,500									
2.—EXTRACTS FROM VITAL STATISTICS OF THE YEAR.									
Total M. F.									
Live Births Legitimate 13,778 7,129 6,649 Illegitimate 863 433 430									
Total 14,641 7,562 7,079 Birth-rate 19.0									
Still-births Legitimate 390 210 180									
Illegitimate \dots 30 15 15 \dots Rate per 1,000									
Total 420 225 195 total births 27.9									
Deaths 8,489 4,356 4,133 Death-rate 11.0									
Death from Puerperal Causes : Rate per 1,000 Deaths total births									
Puerperal and Post-abortive sepsis 7 0.5									
sepsis70.5Other Maternal causes332.2									
Total $\frac{-}{40}$ $\frac{-}{2.7}$									
Total 40 2.7									
Death Rates of Infants under one year of age :									
All infants per 1,000 live births									
Legitimate infants per 1,000 legitimate live births 45									
Illegitimate infants per 1,000 illegitimate live births 76 Deaths from Cancer (all ages) 1 210									
Deaths from Cancer (all ages) 1,210 Deaths from Measles (all ages) 31									
Deaths from Whooping Cough (all ages)									
Deaths from Diarrhœa (under two years of age) 61									

AREA AND POPULATION.

Since 1934 there has been no alteration in the area of the Administrative County.

The estimated populations have been supplied by the Registrar-General and are primarily given for the calculation of death-rates and the incidence of notifiable diseases amongst civilians, noncivilian deaths and notifications having been excluded from the statistics. Estimates of the numbers and distribution of the non-civilian population are not available and the birth-rates can only be based on the civilian populations of 1945 as used for deathrates.

In the Report for 1939 alterations in the allocation of births and deaths were briefly described.

Until 1940 Areal Comparability Factors supplied by the Registrar-General enabled local death-rates to be adjusted for comparison with the crude death-rate of the Country as a whole or with the similarly adjusted rate of any other local area. Since ther, however, the variety and magnitude of local population movements, and the uneven incidence of civilian war deaths, have together combined to frustrate the attempt to secure such comparability, so that the factors cannot be provided under present conditions.

The estimated population and rates for each District are shown in the tables at the end of the Report.

In the following table the census population of the Administrative County for 1931, and the estimated civilian population for 1945, are set forth:—

adiai	() Loster	Census, 1931	Estimated Population, 1945
Urban	5,	 490,632	*578,510
Rural		 212,622	*190,140
Totals		 †703,254	768,650

*The increase in the population of the Urban Districts, and the decrease in that of the Rural Districts, is due to the changes in Sanitary Districts and boundaries which took place on the 1st April, 1934, under the Staffordshire Review Order, 1934.

[†]The census population of the Administrative County as constituted at the 31st December, 1945, is less than this figure by 2,902. The estimated population in the portion of the County area transferred to the County Borough of Wolverhampton on the 1st April, 1933, was 5,419, but this decrease was partly neutralised by the fact that on the 1st April, 1932, a portion of the County of Warwick, with an estimated population of 2,517 was added to the Administrative County.

BIRTHS.

The live births registered in the Administrative County for birth-rate purposes numbered 14,641, compared with 16,082 the previous year, the number in the Urban Districts being 11,282 and in the Rural Districts 3,359.

Stillbirths.—There were 420 stillbirths registered during the year of which 299 were in Urban and 121 in Rural Districts. The stillbirth-rate per thousand of the population for the combined Urban and Rural Districts is 0.55. During the same period the rate for England and Wales was 0.46.

				LIVE	BIRTI	H-RATI	PER	1,000	OF POI	PULATI	ON	. Serpe		11
DISTRICTS	1889 -	1894 -	1899 -	1904 -	1909-	5 yrs 1914- 1918	1919-	1924-	1929-	1934-	1939-	1943	1944	1945
Combined Urban and Rural	10212					24.0	1.1.1						20.8	03
Urban Rural	1.012					25.0 21.6							alCt of	
Ingland and Wales arge Towns in Englaud		29.7 30.7				20.4 *20.9							17.6 20.3	

* 4 years.

DEATHS.

The number of deaths in the Administrative County amounted to 8,489, the number in the Urban Districts being 6,348, and in the Rural Districts 2,141.

23 23			Di	EATH-I	RATE P	ER 1,0	00 of 1	Popul	ATION					
DISTRICTS	1889-	1894 -	1899 -	1904-	1909-	1914-	1919-		1929-	1934-	5 yrs 1939– 1943		1944	1945
Combined Urban and Rural	18.1	16.9	16.1	14.6	14.1	15.0	12.3	11.4	11.6	11.3	11.2	11.0	10.3	11.0
Urban	18.9 16.8							1.00			11.2		100	
	19.1	THE PARTY												
ngland and Wales arge Towns .											14.0			
maller Towns	17.6	15.9	15.7	14.9	13.6	14.1	11.5	11.0	11.2	11.4	12.4	12.7	12.4	12,3

In the following table I have shown the *chief* causes of death for the last ten years, the numbers given for 1945 being 71.4 per cent. of the total deaths :—

hes (260) by		1936	1937	1938	1939	1940	1941	1942	1943	1944	1945
*Zymotic Diseases		217	241	194	193	178	218	187	188	157	131
Influenza		121	359	142	166	207	189	69	263	83	722
Tuberculosis of Respi tory System	ra- 	358	412	372	368	348	402	373	373	349	367
Tuberculosis, other fo	rms	74	90	' 93	75	74	121	92	75	72	783
Cancer		968	989	1033	1046	1096	1095	1183	1128	1151	1210
†Cerebral Hæmorrhag	e	477	505	472	492					-	_
†Intra-Cranial Vascu Lesions	lar	-				808	799	756	818	789	842
Heart Disease		1846	2006	2003	2246	2024	1889	1752	1898	1845	2003
Bronchitis		366	329	262	273	797	631	439	575	451	6022
Pneumonia		540	603	633	403	474	514	387	423	350	374
Premature Birth Congenital Malforma		472	482	428	466	217	224	237	212	237	160
Birth Injuries, Infa tile Diseases	an-)	1/2	402	120	400	231	243	234	210	242	218

TABLE SHOWING CHIEF CAUSES OF DEATH

*Typhoid and Paratyphoid Fevers, Measles, Small-pox, Scarlet Fever, Whooping Cough₄, Diphtheria and Diarrhœa.

† Change of Classification.

MORTALITY AT DIFFERENT AGES FROM VARIOUS CAUSES.

The following table gives the mortality from various causes in different age groups in the Administrative County during 1945 :—

	A Callson Tay Examination	Ghel		A	ge at Da	ath		
010	Causes of Death	Under 1	1 and under 5		15 and under 45	45 and under 65		Total
1.	Typhoid and Paratyphoid			di.i.				
2	Fevers	4		1	24	2		2 15
3.	Scarlet Fever		4	2	4	-		2
4.	Whooping Cough	10	9	-			-	19
5.	Diphtheria	-	2	11	3	-	-	16
	Tuberculosis of Respiratory System	2	2	6	240	103	14	367
7.	System	3	26	11	240	8	4	78
8.	Syphilitic Diseases	2	-		6	15	4	27
9.	Influenza	4	2	-	14	23	29	72
	Measles	6	18	7		-		31
• • •	Polioencephalitis	-	_	4	1	1		6
	Acute Infectious Encephalitis		1		4		2	7
13.	Cancer of Buccal Cavity and					50	in	100
14	Œsophagus (M) Uterus (F) Cancer of Stomach and	-	_	-	14	52	60	126
	Duodenum			_	15	115	122	252
15.	Cancer of Breast	-		-	16	63	47	126
16.	Cancer of all other sites	-	3	23	61	279	361	706
17.	Diabetes	-	-	3	7	22	58	90
10.	Lesions	_	_	1210	12	205	625	842
	Heart Disease	-	-	9	99	462	1433	2003
20.	Other Diseases of				10	10	100	000
21	Circulatory System Bronchitis	30	6	$\frac{1}{2}$	$ \begin{array}{c} 10 \\ 23 \end{array} $	43 188	182 353	236 602
22.	Pneumonia	134	31	9	30	75	95	374
23.	Other Respiratory Diseases	2	4	-	16	41	35	98
24.	Ulcer of Stomach or						00	
95	Duodenum	58	3	_	17	34	23	74 61
26.	Diarrhœa under 2 years		3	8	12	4	7	34
27.	Appendicitis	7	4	4	29	60	84	188
28.	Nephritis	2	3	-	33	62	92	192
29.	Puerperal and Post-Abortive			1.60 1981	C		1000	7
30	Sepsis	_	_		6 31	$\frac{1}{2}$	-	33
	Premature Birth	160	-	-	-	_		160
	Congenital Malformations;	1	11 contraction	A I I I I I I I I I I I I I I I I I I I		110	1000	
	Birth Injuries; Infantile	201	0	-	1	0		010
33	Diseases Suicide	201	2	7	4	3 16	1 18	218 53
	Road Traffic Accidents	I	9	16	27	14	14	80
35.	Other Violent Causes	26	18	16	57	67	67	251
	All other causes	36	21	29	79	137	739	1041
-		687	171	148	917	2097	4469	8489
	Totals							

The following table has been prepared covering the last 26 years, in which the percentage of deaths under 45 years of age is worked out in relation to the total deaths at all ages, and in the table the sexes are divided. Speaking generally, in 1945 22.7 per cent. of all deaths occured under the age of 45.

DEATHS UNDER 45 YEARS OF AGE-MALE AND FEMALE-SHEWING PERCENTAGE OF TOTAL DEATHS (ALL AGES).

		MALE	12 1 19W	FEMALE				
YEAR	Deaths	Deaths	% of	Deaths	Deaths	% of		
	all ages	under 45	Total	all ages	under 45	Total		
1920 1921 1922 1923 1924 1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936 1937	4626 4545 4534 4197 4332 4556 4148 4458 3965 4813 4100 4376 4190 4213 4105 4284 4203 4793	2295 2120 1943 1816 1795 1919 1658 1766 1449 1827 1473 1472 1425 1415 1261 1354 1266 1484	49.61 46.64 42.58 43.27 41.43 42.12 39.97 39.61 36.54 37.96 35.92 33.64 34.01 33.59 30.72 31.61 30.12 30.96	4084 3985 4191 3788 3906 4161 3808 4082 3563 4293 3672 3933 3672 3933 3824 3900 3655 3802 4022 4075	1935 1759 1793 1556 1520 1724 1441 1564 1180 1453 1211 1272 1174 1207 1054 1159 1100 1041	47.38 44.14 42.78 41.08 38.91 41.43 37.84 38.31 33.12 33.84 32.98 32.34 30.70 30.95 28.84 30.48 27.35 25.55		
1938	4497	1296	28.82	3915	1065	27.20		
1939	4498	1223	27.19	4038	973	24.10		
1940	4899	1315	26.84	4246	1069	25.18		
1941	4882	1436	29.41	4110	1086	26.42		
1942	4257	1150	27.01	3742	970	25:92		
1943	4403	1090	24.76	4112	1004	24.42		
1944	4136	1069	25.85	3800	889	23.39		
1945	4356	1002	23.00	4133	921	22.28		

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Local Government Act, 1929.

In view of the war, the question of hospital provision remains in abeyance and there has been no further development during 1945.

Poor Law Medical Out-Relief.

There has been no alteration in this scheme.

Institutional Provision for the Care of Mental Defectives.

On the 1st January, 1946, the following certified cases were

chargeable to the County Council :	linvs as
Great Barr Park Colony	469
Stallington Hall	58
Other Institutions (including State Institu-	idt nies
tions) b be be	47
	574
	574

Of the above, 42 cases were on licence from Great Barr and 3 from Stallington Hall. One case was on licence from Besford Court.

In addition, there were 9 certified patients under guardianship chargeable to the County Council.

NURSING IN THE HOME.

(a) General Nursing.

At the end of 1945 there were 104 local Nursing Associations affiliated to the County Nursing Association and 6 which work independently providing the general nursing services in the Administrative County, as compared with 102 and 7, respectively, at the close of the previous year. The Wednesbury Association became affiliated from the 1st May, and Trentham, the major part of whose area is in the City of Stoke-on-Trent, from the 1st November.

I mentioned last year that the County Council were contributing towards the increased cost of the staffs engaged solely in general nursing, consequent upon the adoption of the Rushcliffe recommendations up to the 31st March, 1945, and they subsequently decided to continue the arrangement. The normal grant is equivalent to one-half of the net additional cost, viz., one-quarter of the total, the additional expenditure being subject to a Government grant of 50 per cent., but a further similar payment can be made on application to those Associations whose accounts reveal the need for further financial assistance.

Apart from the Administrative County, the County Nursing Association have nine affiliated Associations, including Trentham mentioned above, working in the County Boroughs of Stoke-on-Trent, Walsall, West Bromwich and Wolverhampton. The West Bromwich Association affiliated during 1945.

(b) Infectious Diseases.

During 1945, no application was received for the nursing

facilities available in the County Health Visiting Area in the event of an epidemic of measles or diarrhœa.

MIDWIVES' ACT, 1936.

Again this year, there is nothing of an exceptional nature to bring to notice regarding the salaried midwifery service, which has been in existence since 1937 and continues to be administered by 93 of the local Nursing Associations, 92 of which are affiliated to the County Organisation. The other is the independent Association at Stafford. In addition, the work of whole-time midwives in four areas is directly controlled from the County Nursing Association Headquarters.

Again this year, great difficulty has been experienced in filling vacancies, but, whenever possible, the practice of appointing trained nurse-midwives to fill posts vacated by midwives holding the Certificate of the Central Midwives' Board only is put into effect.

During 1945, no Orders were made under Regulation 33 of the Defence Regulations, 1939, temporarily restoring to the Midwives' Roll the names of women who had surrendered their Certificates and claimed compensation under the Midwives' Act, 1936. Up to the end of 1944 ten such authorisations, affecting eight women, had been issued, but at the end of the current year the number practising was reduced to three, who were employed by Nursing Associations participating in the salaried service, two as district midwives and the other on the relief staff.

I give below a summary of the staff placed in districts, *i.e.*, excluding relief nurses, at the end of the year. In addition, there were seven unfilled vacancies, three for whole-time midwives and four for nurse-midwives.

			WHOLE-	TIME MII S.R.N.	WIVES	PART-TIME MIDWIVES S.R.N.			
			Queen's		S.C.M.	Queen's		S.C.M	
Affiliated Associa	tions		3	21	36	25	7	40	
Unaffiliated Asso	ciation		2	3	hu ndi	ne f- ent	0-10		
County Nursing	Associatio	n		isingan	A . cent				
Headquarters	••		-	5	12				
	Totals		5	29	48	25	7	40	
				and the second se				and the second s	

S.R.N.-State Registered Nurse. S.C.M.-State Certified Midwife.

As will be seen there were 154 midwives, 82 whole-time and 72 part-time.

The central relief staff at the close of 1945 consisted of 10 nurses, viz., 2 Queen's, 3 S.R.N., S.C.M., and 5 holding the Certificate of the Central Midwives' Board only.

The Parish of Tutbury (Tutbury R.D.) which is the only area not included in the Scheme, is served by an entirely independent unaffiliated Nursing Association.

MIDWIVES ACTS, 1902-1926.

The area for which the County Council is the Local Supervising Authority for the purpose of the Midwives' Acts is the whole of the Administrative County with the exception of the Municipal Boroughs of Rowley Regis and Tipton. There are 23 Urban Districts and 10 Rural, with an estimated population of 687,220. In addition to the two districts mentioned, the area in which the County Council is responsible for maternity and child welfare purposes, does not include the Municipal Boroughs of Bilston, Newcastle, Stafford and Wednesbury, and the Urban Districts of Cannock and Coseley, so that the population in this respect is reduced to 458,840.

For inspection purposes the area is divided into three districts, North, Central and South, and there is a non-medical Supervisor resident in each. With the supervision of midwives are combined the inspection of Health Visitors and School Nurses, other activities in connection with the Child Welfare Scheme, etc. During the year, 1,176 visits and interviews were undertaken for midwifery purposes.

On the 31st December there were 200 domiciliary midwives resident in the County area who were actually practising, 154 district (82 whole-time, 72 part-time) and 10 relief midwives employed by Nursing Associations under the Scheme, and 36 in independent practice. Included in the latter figure are 5 midwives who were also engaged at registered Maternity Homes, and, in addition, there were 31 maternity home midwives who do not undertake domiciliary cases. The Assistant Superintendent of the County Nursing Association also notified to cover probable rare relief duty. Twelve out-of-area midwives, including two employed by a Nursing Association whose area extends into Staffordshire, were in active practice at the end of the year. Twenty other midwives, 17 resident within the County and 3 outside, notified their intention to practice but attended no cases. None of the midwives resident within the County is *bona-fide*.

Since the Act came into operation in 1902, the names of 115 midwives have been removed from the Roll in consequence of action taken by the Local Supervising Authority.

No applications were received during the year from independent midwives for compensation for loss of practice consequent upon suspension from duty, they themselves not being in default, after contact with infection. In the following table the age groups in which the salaried midwives fall are shown :--

- Transmissi	don1.00824.	Sarran	65 and
	21-44	45-64	upwards
District	73	81	The pile
Relief Staff	5	5	pro edil'a p

During the year 9,581 cases, 9,276 live and still-births and 305 miscarriages and abortions, were attended by domiciliary midwives, and the following summary indicates the numbers taken by each class of midwife :—

Salaried :						Cases
Whole-time	aloina	the M	obuion	i ton		6,472
Part-time			9.62.140			2,099
Independent resider						923
Out-of-area, includi	ng Ass	ociation	n midw	ives		87
					101184	
						9,581

Roughly the average individual number of cases taken by whole-time salaried midwives, based on the normal staff of 85, was 76.

In the table which follows more detailed information of the cases attended is given :—

	Registered Births	*As Mi	dwives	†As Matern Nurses		whi reco	chs in ect of ch no rd is lable
	(Live and Still- born)	Births	% of total	Births	*% of total	No.	% of total
Live and Stillbirths	13,403	7,447	55.6	1,829	13.6	4,127	30.8
Abortions and Miscarriages	-	196	-	109	A	a 2 -	

* Doctors not having been engaged for the confinements.

† Doctors having been engaged by the patients.

‡ These figures are in respect of births which (i) were attended by doctors, no midwife having been engaged; (ii) took place outside the Administrative County; (iii) took place in Institutions. Seven hundred and ninety-six live and stillbirths, together with 9 abortions or miscarriages, occurred at Public Assistance Institutions, and 1,271 plus 2 abortions or miscarriages at Maternity Homes.

The rules of the Central Midwives' Board require certain notifications by midwives, and particulars are given in the following table. The last eight years only have been included in view of the curtailment of the area in 1937.

Year.	* No. of Births attended by Midwives.	Medical Aid Notices.	Stillbirths.	Death of Mother.	Death of Child.	Contact with Infection.	Laying out the Dead.	Artificial Feeding.
1938	8730	4283	222	9 5 8 7	174	158	44	249
1939 1940	8778 8714	4297 3822	222 206	3	206 176	161 157	38 31	262 253
1940	9101	3966	220	8	187	151	38	280
1942	9325	3811	214	7	161	118	38 28	331
1943	9190	3546	172	3	159	125	17	374
1944	9136	3482	143	88	181	108	21	484
1945	8159	3259	133	8	119	113	14	460

* Including midwifery cases in Maternity Homes

The percentage of doctors' calls to the number of births attended by midwives in 1945 was 39.9. In 1915 the corresponding figure was 10.7 per cent., and the increase since can be ascribed to the trained type of midwife now practising.

The following figures show the causes which occasioned the sending for medical assistance :--

PREGNANCY :					
Disproportion					50
Query Presentation	1				59
Threatened Abortic	on				51
Puffiness of face ar	nd has	nds			40
Varicose Veins					8
Fits					1
Vaginal Discharge					29
Unsatisfactory con-	dition	and g	eneral l	health	165
Excessive Sickness					8
Loss of Blood					82
Albuminuria					96
Blood Pressure					27
Cardiac					11

Total

627

LABOUR :		
Premature Birth		30.
Abnormal Presentation		96
Delayed or Difficult		459
Placenta Prævia	121 10	6
Hæmørrhage Ante-Partum		19
Ditto Post-partum		88
Eclampsia		1
Prolapse of Cord		4
Lacerated Perinæum		888
Retained Placenta and Membranes		69
Unsatisfactory Condition		65
Inertia		65
Al and in		114
Purulent Discharge		1
i ululent Discharge	• • •	1
Total		1,905
LYING IN :	••	1,000
		100
High Temperature	0.5	100
Inflamed and painful Leg ,	• •	29
Abdominal Swelling and Tenderness	• •	2
Unsatisfactory Condition	• •	91
Offensive Lochia		4
Unusual Swelling of Breasts	• •	26
Excessive or Prolonged Bleeding	• •	1
Total	• •	253
CHILD :		
Deformities		33
Convulsions		14
Inflamed and discharging eyes		138
Feebleness and prematurity		99
Unsatisfactory Condition		150
Rash		7
Pemphigus		$\frac{2}{6}$
Spina Bifida		6
Hare Lip and Cleft Palate		4
Jaundice		15
Hæmorrhage : Bowel		
do. Navel		$2 \\ 1$
do. Mouth		3
Total		474
and all the second representations whereas by a		
Grand Total		3,259
		and the second s

During the financial year ended March, 1946, 3,210 notifications of sending for medical help were received, and, out of this number, Medical Practitioners claimed their fees from the County Council in 1,262 cases, that is, 39.3 per cent. of the possible claims.

In the last eight financial years the fees paid by the County Council were as follows :—

Finan- cial Year	No. of Notifications of sending for Medical Aid	No. of Claims received	Percentage of claims received to Notifications	Total amount paid to Doctors during year	Amounts recovered from Patients during year
1938-39	4402	2424	55	£ s. d. 3513 18 9	£ s. d. 1593 16 0
1939-40	4256	2319	54	3614 6 6	1576 17 10
1940-41	3944	1959	50	3167 16 0	2026 16 2
1941-42	3920	1870	48	3420 8 4	1939 8 3
1942-43	3883	1680	43	3067 0 0	2273 17 7
1943-44	3482	1267	36	2322 2 6	1548 3 0
1944-45	3345	1354	41	2454 5 6	1022 12 4
1945-46	3210	1262	39	2389 9 6	1453 18 11

In my last report I gave particulars of a revised income scale which was adopted from the 22nd July, 1944, and there has been no alteration during the period now under review.

	ni los	CASE	s		amila er	ali 12 ai		REAL R
		T	REATED		Vision Un-	Vision	Total Blind-	Deaths
Year	Notified	At Home	In Ho In- pat'nt	spital Out- pat'nt	impaired	Impaired	ness	Deaths
1938	193	166	11	16	191		_	2
1939	203	180	20	3	203		-	
1940	162	145	12	5	160			2
1941	183	165	11	7	181			2
1942	167	149	14	4	167			
1943	135	117	13	5	135	- //		-
1944	144	129	7	8	144			
1945	138	118	16	4	136	1		1

INFLAMED AND DISCHARGING EYES.

The 138 cases in 1945, 98 of which were not severe, include medical aid calls for all unsatisfactory eye conditions and not notified cases of Ophthalmia Neonatorum only. The County Council are concerned with the notification and treatment of the latter condition in their Health Visiting Area, which is dealt with later in the Report.

STILLBIRTHS.

In the area now administered by the County Council under the Midwives Acts, 375 stillbirths were registered during the year.

As already indicated, 133 were reported by midwives, a figure which has varied little during the last 20 years, and the causes were as follows :—

1 2007					3
Hæmo	orrhage				1
eck .					5
		1914			4
		eite			8
our					7
					62
on		100			1
					30
					3
y Cond	lition of	of Moth	ner		7
via					1
					1
	Hæmo eck our on y Cond	eck our on y Condition o	Hæmorrhage eck our on y Condition of Moth	Hæmorrhage eck our on y Condition of Mother	Hæmorrhage eck

PUERPERAL PYREXIA REGULATIONS.

Puerperal Pyrexia is defined as any febrile condition occurring n women within 21 days after childbirth or miscarriage, in which a temperature of 100.4 or more has been sustained during a period of 24 hours, or has recurred during that period.

The following are particulars of the notifications from the Administrative County during 1945 :---

	Loca	rea of Co I Superv Authority	vising	In areas other Authorit		Total
Urban Districts		43		2		45
Rural Districts		17		81 81		17
		-		6191- an		- 110
		60		2	(Lao)	62
				Contraction 1		1 1 1 2 5 4 5 1

The case rate for Puerperal Pyrexia per thousand total births (live and still) for Staffordshire is 4.12, as compared with 9.93 for England and Wales.

As will have been observed from a previous table, in the area administered by the County Council as Local Supervising Authority, the midwives summoned medical assistance for rises of temperature on 100 occasions. These were specially investigated by the Supervisors, and it was found that in 57 instances the unsatisfactory conditions were due to abnormalities which could be said to arise diractly from childbirth.

The facilities provided in the Health Visiting Area are mentioned in the appropriate section of the Report.

MATERNITY AND NURSING HOMES.

The County Council are responsible for the registration and inspection of these Homes in the Administrative County.

At the end of the year the number of premises registered was 24, as compared with 23 at the close of 1944. In 1945, six applications for registration were granted, and five Homes were given up. Of the Homes registered 11 only have more than two beds each, and 21 are solely for midwifery and maternity cases. In addition, four exemptions previously allowed were continued.

The County Council have not delegated any of their powers under Section 194 of the Public Health Act, 1936, or earlier provisions, nor have any applications been received for such delegation.

COUNTY COUNCIL MATERNITY UNITS.

At the 31st December, the maternity beds (exclusive of those for isolation and labour) available at Public Assistance Institutions were as follows :—:

Cannock						4
Leek						10
Lichfield						11
Sedgley :	House					8
	Rosemar	y E	dnam .	Maternity	Home	28
Stafford						5
Wordsley						20

The arrangements made by the County under their Health Visiting Scheme are dealt with in the appropriate section of the Report. In addition, however, arrangements exist at the Mrs. Legge Memorial Home, Wolverhampton, for the reception of prospective unmarried mothers. In 1945, six cases were admitted.

MATERNAL MORTALITY.

In the accompanying table the maternal mortality rate for the Administrative County, showing the deaths per thousand (live and still) births in the last ten years is given.

	1	DEATH	S FROM		Maternal Mortality per 1,000 (Live and Still)		
Year	Total (Live and Still)	Puerperal	Other Diseases and		lirths		
rear	Births	Sepsis	Accidents of Parturition	Staffs.	England and Wales		
1936	12,995	14	33	3.6	3.6		
1937	13,485	15	33	3.6	3.1		
1938	13,834	12	28	2.9	3.0		
1939	13,874	13	28	3.0	2.8		
1940	14,069	8	28	2.6	2.2*		
1941	14,372	16	31	3.3	2.2*		
1942	15,351	14	31	2.9	2.0*		
1943	15,941	13	30	2.7	2.3		
1944	16,557	10	21	1.9	1.9		
1945	15,061	7	33	2.7	1.8		

* Abortions excluded.

When commenting on the extremely satisfactory rate of 1944, which was the lowest ever recorded in the Administrative County, I mentioned that, as so many factors are involved, one cannot generalise on maternal mortality or estimate what might happen in the future, and this is proved by the result for 1945, which, as will be seen, is a reversion to the rate for 1943. It is unfortunate that although in the period under review there were 1,496 fewer live and still-births as compared with the previous year, the maternal deaths were greater by 9, and that, whilst the national rate was slightly reduced, that of the Administrative County was materially increased. In the latter connection I would again mention that, in view of the nature of our area, it is always anticipated the national rate will be the lower.

From the information available it is not possible to arrive at an exact national mean rate for the ten year period shown in the table, but the mean rate for the County is 2.9.

Thirty-eight of the maternal deaths occurred in the area of the Local Supervising Authority. Eight were reported by midwives in accordance with their rules, *i.e.*, the deaths occurred whilst they were actually in attendance as midwives or maternity nurses.

The services provided by the County Council in connection with the efforts to reduce maternal mortality are detailed in the Health Visiting Section of the Report.

INFANTILE MORTALITY.

The infant mortality rate for 1945 was 47 per thousand live births as against 48 in the previous year. The rate in Urban Districts was 48 which was the same as last year, and in the Rural Districts 42 compared with 49. In England and Wales in 1945 the infantile mortality rate was 46 and here again there was no change. In the table which follows are shown the rates for the last ten years and also those for England and Wales as a whole. Also shown in this table are various causes of infantile deaths in Staffordshire for the same period.

TITLE OF STREET			TOT	VL DEAT	TOTAL DEATHS UNDER ONE		YEAR OF	F AGE		
CAUSES OF DEATH.	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945
Measles	7	7	5	9	1	7	0	4	1	9
Scarlet Fever	1	1	1	1	1	1	1	1	1	1
Whooping Cough	18	19	14	15	10	29	20	6	11	10
Diphtheria	4	67	5	1	1	1	1	61	1	
Influenza	8	13	3	2	13	10	7	18	2	4
Cerebro-Spinal Fever	6	9	3	1	9	2	4	9	1	4
Tuberculosis of Respiratory System	10	1	1	1	1	1	2	2	1	2
Other Forms of Tuberculosis	8	8	15	8	4	10	8	2	11	3
Syphilitic Diseases	5	1	4	1	3	3	2	-	2	2
Acute Infectious Encephalitis	1	1	1	1	1	1	1	1	1	1
Cancer	1	1	1	1	1	1	1	1	1	1
Intra-cranial Vascular Lesions	1	1	1	1	1	1	-	1	4	1
	1	1	1	1	1	1	1	1	1	1
Nother Circulatory Diseases		•	1	1	1	1	1	1	1	1
* Bronchitis	31	29	25	34	31	56	26	30	19	30
Pneumonia	121	115	120	103	116	162	100	131	110	134
Other Respiratory Diseases		2	4	5	2	4		c1	67	2
Diarrhœa	. 66	52	52	55	65	63	83	72	82	58
Appendicitis	1		1	1	1	1	1	1	1.	1
Cirrhosis of Liver	1	1	1		1	1	1	1	1	1
Other Digestive Diseases	. 11	9	0	14	8	12	6	14	8	7
Nephritis		1	1	1	-	53	1	1	1	5
Premature Birth	465	474	415	454	216	224	237	212	- 237	160
Congenital Mailormations, Birth Injuries, Infantile Diseases	00	I,	10		417)	077	117	140	017	201
Violence	07	11	10	+-	13	27	61	91	77.	26 -
Other Denned Diseases	200	33	63	94	\$ 40	38	31	48	38	36
Causes III-denned of unknown		1	1	1	1					20
TOTALS	837	789	751	770	748	879	763	775	772	687
1	. 67	61	57 53	58	55 55	63	52 49	50	48	47
-	_	00	20	20	00	00	1 OL	25	05	40

The result in this instance is most satisfactory, for the infantile mortality rate of 47 is the lowest experienced in the Administrative County, and, as will be seen from the table, there was no reduction in the rate for England and Wales as a whole. The present downward tendency in Staffordshire has now been evident since 1941, and is particularly encouraging in view of the fact there has been a war lasting six years. However, as in the case of maternal mortality, one cannot dogmatise, but it is hoped the steady improvement will be maintained.

This year, in the aggregate, there was no change in the Urban Districts as compared with 1944, but a distinct improvement in the Rural Areas : in 6 of the 10 latter reduced rates were recorded.

On comparing the numbers of live births in 1944 and 1945, it will be seen there was a reduction of approximately 9 per cent. in the latter year, which must be borne in mind when looking at the numbers of deaths from the various causes. It is apparent, however, there were general substantial reductions in the deaths from diarrhœa and premature birth, which, unfortunately, were mainly countered by corresponding increases in those from pneumonia and bronchitis. However, as previously stated, on the whole the position is most gratifying, and particularly the reduction in the number of deaths due to premature birth, for, unlike the other causes I have specially mentioned, they are not subject to climatic influences.

Normally, premature birth, congenital malformations, birth injuries and infantile diseases, will account for the largest group of deaths, and until 1945 the annual total had been fairly constant. This year, however, there is a substantial reduction, mainly in the deaths from premature birth, of 92 as compared with the previous year, or approximately 20 per cent., as against roughly a 9 per cent. reduction in the number of live births. The following table has been prepared to show the statistics relating to this group for the last decade and demonstrates this year's improvement.

Year. Live Births.		Deaths of Children under one year of age from Congenital Debility, Malformations, Premature Birth, &c.	Death-rate per 1,000 Live Births.	
1936	12,441	465	37.4	
1937	12,885	474	36.8	
1938	13,252	415	31.3	
1939	13,324	454	34.1	
1940	13,570	430	31.7	
1941	13,861	447	32.2	
1942	14,807	448	30.3	
1943	15,414	410	26.6	
1944	16,082	453	28.2	
1945	14,641	361	24.7	

One hundred and nineteen deaths were reported by the midwives, having occurred whilst they were in attendance. Fifty of these were due to feebleness and prematurity, and 35 to deformity and malformation.

HOSPITALS.

In my 1930 and subsequent Annual Reports details and developments of the County's Hospital Services were given, and I have already mentioned that in view of the war the question of hospital provision under the Local Government Act, 1929, still remains in abeyance.

At the County Council's Standon Hall Orthopædic Hospital 120 beds are still available for patients of the various Committees, the war having postponed the contemplated extensions. During 1945, 160 cases were treated for the Joint Board for Tuberculosis, 53 for the Education Co.⁴ mittee, 2 for the Public Assistance Committee, 27 under the Health Visiting Scheme, 7 for outside Authorities, and 1 under the Emergency Hospital Scheme.

In last year's report I mentioned that from the 25th February, 1945, Standon Hall was approved as an affiliated training school with the object of providing two years' general training in continuation of the two years' preliminary training received by nurses at the Orthopædic Hospital, the appropriate arrangements having been made with the London Road Hospital, Stoke-on-Trent, the North Staffordshire Royal Infirmary, Stoke-on-Trent, and the Royal Hospital, Wolverhampton.

CLINICS AND TREATMENT CENTRES.

The number of Clinics and Treatment Centres was set out in detail in the 1930 Report, and the changes in each subsequent year have been stated in my Annual Report.

The changes in Infant Welfare Centres which have taken place during 1945 are given in the section of the Report below, dealing with the Health Visiting Scheme.

HEALTH VISITING SCHEME.

As I have already mentioned, the County Health Visiting Area consists of 17 Urban and 10 Rural Districts which have an estimated total population of 458,840.

Except for minor additions and amendments this scheme has continued in its entirety, and there is nothing of an exceptional nature to report. The following, however, are brief details of the various activities :—

INFANT WELFARE CENTRES.

This service has been well developed over a long period and

there was little change during 1945. As stated last year, the sessions of the Welfare Centre at Berkswich had temporarily to be suspended as the rooms were required by the Military Authorities, but it became possible to resume activities there from the 14th February, 1945. On the 31st December, therefore, there were 37 combined centres (*i.e.*, Minor Ailments' Clinics and Welfare Centres) and 30 Welfare Centres only. In addition, there is one voluntary Welfare Centre.

At Eccleshall new premises were obtained and occupied from the 17th August, and at Barton-under-Needwood and Tettenhall the sessions were resumed at the pre-war premises, which had been taken for military and civil defence purposes, on the 3rd July and 1st August, respectively.

In total, 3,954 Welfare Centre Sessions were held in 1945, against 4,023 in the previous year, 66,630 attendances being made by children under one year of age, and 46,727 by children between one and five years. The numbers of children in these groups who attended for the first time during the year were 5,116 and 1,437, respectively. At the end of the year the number of children on the books at the Centres was 4,466 under one year, and 6,705 over one and under five.

ANTE-NATAL CLINICS.

Here again, there has been no development during the period under review, so that at the end of the year there were still 37 centres fully equipped for ante-natal purposes, special sessions being held at 23 of them.

During 1945, 3,089 expectant mothers attended the Clinics, with a total attendance of 11,318.

Where treatment is required, the patient is referred to her own doctor, through the medium of the midwife, if one has been engaged, except for unsatisfactory dental conditions. Treatment of the latter can be given under the County Council Scheme, and the patients are offered the facilities provided.

RURAL ANTE-NATAL SCHEME.

Under this scheme, which operates mainly in rural areas where there are no Ante-natal Clinics, 503 expectant mothers were examined by their own doctors, compared with 618 in 1944.

As a result, it was found that 410 confinements could safely be conducted by the midwives at the patients' homes, but in 31 instances special advice was necessary.

In 49 cases, further examination only was considered desirable,

but in other instances this requirement was coupled with additional recommendations, as follows :—Attendance of doctor at confinement 1 and Institutional confinements 2.

In the remaining cases the following recommendations were made as a result of the initial examinations :—

A doctor to be present at the confinement	3
Specialist opinion and hospital	2
Specialist opinion only	12
Confinement in hospital because of physical	
condition	6
Institutional confinement because of un-	
satisfactory home surroundings	16
Physical condition and unsatisfactory	
home surroundings	2

In addition, 18 of the women were found to require dental treatment, which was offered under the County Council Scheme.

CONSULTING OBSTETRICIANS.

Where necessary, this important provision enables the General Practitioner to obtain the assistance of a Specialist at any time during pregnancy, labour or the lying-in period, and the facility is frequently sought. During 1945, the Consultants were concerned with 480 cases, as against 410 in the previous year.

This activity also includes arrangements for the use of a "Flying Squad" provided by the Birmingham Maternity Hospital for instances where a patient's condition demands specialist services, *i.e.*, blood transfusion, etc., and it would be dangerous to transfer her to hospital. A doctor, nurses and the requisite equipment, are therefore taken to the patient, and, during 1945, the facility was afforded to one woman resident in the County Welfare Area.

MATERNITY HOSPITAL TREATMENT.

Arrangements exist at many hospitals for the reception of women whose medical conditions necessitate admission, and during 1945 345 such patients were dealt with, as compared with 231 in 1944.

MATERNITY HOME PROVISION.

In the 1944 Annual Report a very full account was given of the County Council's intentions in this connection, both as regards short term and long term policies, the ultimate object being to provide adequate accommodation, first for women, whe, because of unsatisfactory accommodation and/or lack of domestic help, cannot be confined at home, and secondly, any others who prefer confinement in maternity homes. Many avenues were explored with a view to making short term arrangements, but the only immediate success obtained was agreement with the Public Assistance Committee under which the following beds were made available at the Institutions named :---

> Beds rented by Public Health Committee

Total Beds	At	Additional to be provided as soon as possible
10	5	10
11	7	14
18 (a)	12	rans strand- in 1945
5	3	internet ministerad
20	15	20
	Beds 4 10 11 18 (a) 5	Beds onset 4 2 10 5 11 7 18 (a) 12 5 3

(a) The total provision is 28 beds, 10 of which are allocated to the County Borough of Dudley.

With the exception of Cannock where the Public Health Committee beds became available from the 5th September, 1944, this scheme was put into effect from the 1st July, 1944. The exact arrangements as regards terms, the use of unoccupied beds by the two Committees, the methods of booking, giving ante-natal care and providing transport, together with patients' fees, etc., were fully explained in the 1944 Report, and so far smooth working has been ensured.

As regards the long term policy, it was agreed that the planning of the maternity homes should be based on provision for 50 per cent. of the average annual total births occurring in the County Maternity and Child Welfare Area, but that the beds which exist at the Public Assistance Institutions, together with those at private establishments, should be included in the calculations, as well as the average number of those occupied at maternity and other hospitals by patients who, because of abnormalities, could not be dealt with elsewhere.

To carry out such a policy the building of new maternity units in various parts of the County Welfare Area would have to be undertaken, in which connection the desirability of conferring with the autonomous Maternity and Child Welfare Authorities with a view to co-operation was evident, and, in addition, it was appreciated that the development of any scheme would be dependent on the Government's intentions regarding a national hospital service. In any event, it had been ascertained from the Ministry of Health that the preparation of schemes could be proceeded with. The foregoing then was briefly the position up to and including the January, 1945, meeting of the County Council, and very little effective action was possible during the remainder of the year. The search for suitable empty houses continued, however, and at their June, 1945, meeting the Public Health Committee further considered the establishment of a maternity home at "The Hermitage," Uttoxeter, which was the subject of negotiations at the close of 1944, and decided not to proceed in the matter.

As regards the beds rented by the Public Health Committee at the Public Assistance Institutions, in view of the limited provision, admissions were restricted to those women who could not possibly be confined at home, and the following are particulars of patients received during 1945 :—

Cannock	 	 	24
Leek	 	 	112
Lichfield	 	 	110
Sedgley	 	 	195
Stafford	 	 	52
Wordsley		 	189
			100 M
			682

1

The foregoing total of 682 corresponds with 217 patients in the previous year, 170 of whom were admitted after the 1st July when the special arrangement with the Public Assistance Committee became effective.

In addition, responsibility was accepted for the maintenance of two County cases at the Burton-on-Trent Public Assistance Institution, where they had been received in emergencies, and 59 women were admitted to the Ashbourne Maternity Home of the Derbyshire County Council but paid their own fees, the County Council merely giving guarantees against default.

MATERNITY OUTFITS.

During the war the demand for these outfits was negligible, and, as in the previous year, none was disposed of in 1945.

PAYMENT OF MIDWIVES' FEES.

When the salaried midwifery service commenced it was appreciated that independent midwives would still exist, and that it would be essential to obtain their co-operation as regards the participation of their patients in the facilities provided by the County Council, particularly during the ante-natal period. To encourage this, it was decided to pay a compensation fee of 10s. 0d. where a case is lost as a result of County Council activities. No application was received in 1945, which was also the case in the previous year.

PUERPERAL PYREXIA.

In the Health Visiting Area a Consultant and Hospital Service is at the disposal of the General Practitioners. During the period under review, 50 cases were notified, compared with 53 last year. Under the Scheme a Specialist's opinion was obtained in one instance, and 18 patients were sent to hospital. In addition, it was ascertained that 21 women from the area received hospital treatment through other agencies; in 6 instances the confinements had taken place in hospital.

Ophthalmia Neonatorum.

Thirty-four cases were notified from the Health Visiting Area, compared with 31 in 1944, and in 21 instances home nursing was carried out by the Health Visitors. Ten children were admitted to hospital for treatment and 3 attended as out-patients. In all cases the vision was unimpaired.

The County Council provide hospital treatment.

OPHTHALMIC TREATMENT.

One hundred and fifty-one children under 5 years of age were referred to the County Ophthalmic Surgeon from the Welfare Centres, mainly on account of an actual or suspected squint. Glasses were prescribed for 86 cases; in 6 instances the County Council provided them. Generally, where there was unilateral squint the sound eye was occluded, but if this was found to be impracticable, atropine was inserted weekly until it was found possible to have the eye occluded. These children were kept under constant supervision, and in 34 cases other forms of treatment were advised.

Patients seen in previous years were re-examined during 1945, and the total number of attendances at the Clinics, including both old and new cases, was 294.

ORTHOPÆDICS.

The County Council have not established any Orthopædic Clinics, but have arrangements with voluntary bodies who have established Clinics at Leek, Stourbridge, Hartshill, Birmingham, Stafford, Lichfield, Tamworth, Walsall and Dudley, where cases are received on payment.

Two hundred and twenty-one new cases, as against 234 last

year were sent to Orthopædic Clinics for out-patient treatment in the first instance as follows :---

Bow Legs					23
Deformities of Fee	t				86
Deformities of Han	nds				2
Fractures					6.
Knock Knees					59
					9
Torticollis (Wry-ne	eck)				8
Miscellaneous					23
Examined, but tre	atment	t not	necessa	ry	5

It will be noted that no case of rickets is included in this list, but of course there are many conditions classified under other headings, of which rickets has probably been the primary cause.

I give below details of the out-patient attendances, etc., during the year :--

Number of children on books at 31/12/44	374
New cases referred during 1945	221
	595
Removals on account of :	
Discharged cured 77	
Left the area 12	
Attained School age 96	
Treatment refused 15	
Transferred to Joint Board for	
T.B 1	
Died 3	
No treatment found necessary 5	
	209
Number of cases at end of year	386

The total number of attendances at Out-patient Clinics during the year was 2,496.

Twenty-seven children received in-patient treatment at Standon Hall Orthopædic Hospital, 21 of whom were admitted during the year. As mentioned in previous Reports, pending the extension of accommodation at Standon Hall, the Health Visiting Committee have authorised the use of five beds at outside institutions. These are used mostly for short stay cases. In this way three children under five years of age were admitted to the Hartshill Orthopædic Hospital during 1945.

ARTIFICIAL LIGHT TREATMENT.

Since the war began and the Treatment Centre provided by the County Council at Lichfield was suspended, there has been little activity in this direction. The work is now confined to the Leek area and during 1945 9 children only were treated, 5 of whom were new cases. The total attendance was 281.

DENTAL TREATMENT.

The facilities under this scheme, which has now been in operation for eight complete years are available for expectant and nursing mothers, and children under 5 years of age, in the County Health Visiting Area; they are referred for treatment by the Medical Officers of the Ante-natal Clinics and Welfare Centres, and by General Practitioners under the Rural Ante-natal Scheme. A similar service is undertaken at an agreed payment, on behalf of the Stafford Corporation Welfare Committee.

During 1945, 1,030 County patients were treated, compared with 1,156 last year, and the following are the particulars :--

Expectant and Nursing Mothers.

Of 746 patients recommended dental treatment for the first time under the scheme, 685 presented themselves for inspection and 679 accepted. In addition, the treatment of 177 women which had been commenced in the previous year, was completed, giving a total of 856 patients treated during 1945. The number of attendances made for treatment was 4,082, but no less than 551 further appointments were not kept, the latter representing 11.9 per cent. of the total. The number of half-day sessions devoted to the treatment of these cases was 709.

It is unfortunate that this year the percentage of broken appointments has increased, the 1944 and 1943 figures being 9.8 and 11.1 respectively, for an adverse position in this respect means losses of time and expenditure.

Last year it was reported that the general age of the patients had fallen, and the experience in 1945 has been the same, women in their early twenties being encountered. In the majority of cases these patients had received comprehensive treatment whilst attending school, and attention, usually of a minor character due to subsequent neglect, only was required. It was anticipated that with the fall in the general age, less full denture work would be required, and this assumption is proving correct, there being a corresponding increase, of course, in the number of partial dentures supplied. It is considered that the peak has been reached as regards the number of mouths requiring complete clearance, and hoped that, in future, the service will become more and more one of restoring function of the natural teeth rather than a means of extraction and artificial replacement.

The following are particulars of the operations completed during the year :--

Extractions	 	 4,524
Local Anæsthetics	 	 3,801
Dressings	 	 3,087
Fillings	 	 163
Scalings	 	 146
Impressions	 	 707
Bites	 	 302
Try-in	 	 364
Dentures fitted	 	 547
Dentures adjusted	 	 236
Repairs to Dentures	 	 43
Sundry other Operatio		 381
, · · ·		
	direct.	14,301

Thirteen patients were admitted to Institutions for the administration of general anæsthetics, the dental treatment being given by the County Staff.

The artificial dentures together with repairs, were all completed in the County Dental Laboratory.

" Toddlers."

One hundred and seventy-four "toddlers" were dealt with during the year, and 16.5 half-day sessions were devoted to their treatment, the total attendances being 174. On 152 occasions the child was accompanied by a parent.

The treatment comprised :--

Temporar	v teeth	extracted	 	147
Dressings			 	71
Fillings in	n tempor	rary teeth	 	6
Advice			 	81
				305

As remarked in several previous reports, during the war years the dental condition of these children has shown a distinct improvement. As far as this Authority is concerned, prior to 1939 sixty-three per cent. of them were found to require radical and urgent treatment, whereas today 60 per cent. have sound dentitions. Of the 40 per cent. in need of attention, it has been found that the operative treatment indicated is of a minor character and one extraction is usually sufficient to render the mouth functional. EXTRA NOURISHMENT.

During the period under review there has been no change in the County Council's policy which has existed since 1941, when, in view of the presence of National half-cream and full-cream milks, they decided temporarily to dispense with Welfare Centre stocks of ordinary branded dried milks suitable for normal children, previously kept for sale at cost price, or for free issue in necessitous cases. As stated in previous Reports, this decision was made to avoid conflict between the County and National Schemes, and on the assumption that should a shortage of milk supplies be experienced the latter would be given priority.

Full co-operation with the local Milk Officers, who, in the majority of districts, distribute their supplies at the Welfare Centres, still exists. The arrangement also continues under which the County Council provide the additional quantity of dried milk required for a child, whose parents' circumstances are found to be necessitous after applying the Government scale, where the Medical Officer of a Welfare Centre is of opinion that the normal free supply, which is equivalent to one pint of raw milk per day, is insufficient.

During 1945, the totals of the sales at cost prices of special commodifies provided and stocked by the County Council at the Welfare Centres and Ante-natal Clinics were as follows :—

Branded dried milks for	or exp	ectant	and	
nursing mothers and	childr	en		$9,710\frac{1}{2}$ lbs.
Special Foods				$4,256\frac{1}{8}$ lbs.
Emulsions				41 6 oz. bots.
				3,835 8 ,, ,,
				960 10 ,, ,,
Tonic (Minadex)				
Vitamins—"C"				3,070 tabs.
Vitamins—"A" & "D"				219,750 capsules
Glucose				388 lbs.
Vitamins—"C" Vitamins—"A" & "D"	•••	··· ··	· · · · ·	1,112 1 ,, ,, 3,070 tabs. 219,750 capsules

The free issues consisted of 62 lbs. of branded dried milks, 730 lbs. of National Dried Milks, 3 10-oz. packets of special Foods and 2 eight-ounce bottles of emulsion, the corresponding figures for 1944 being 77, $1,857\frac{1}{2}$, nil and 7, respectively.

NOTIFICATION OF BIRTHS.

During 1945, 8,113 live births and 217 stillbirths were notified

in the Health Visiting Area, 7,893 by midwives and 437 by parents and doctors. The births registered during the year, *i.e.*, 8,599 live births and 255 stillbirths, cannot strictly be compared with those notified because of the period allowed by law for each purpose.

CHILD LIFE PROTECTION.

The work carried out by the Health Visitors under this scheme is shown in the following table :—

Number of children on Register at the end	
of December, 1945	41
Number of reports on visits to children	
received during the year 1945	255
Number of new cases during 1945, for	
which preliminary reports were sent in	
by Health Visitors	24
Number of foster-parents on Register at	
end of 1945	38

Adoption of Children (Regulation) Act, 1939.

This Act came into operation on the 1st June, 1943, and the main points are as follows :--

- 1. Except for Local Authorities and Registered Adoption Societies it is not lawful for any body of persons to make arrangements for the adoption of a child.
- 2. Where a child is being placed with a person who is not closely related to him, and a third party, *i.e.*, a person who is not the parent or guardian of the child, or the person into whose possession he is to be placed, participates in the arrangements, the third party must give notice in writing to the Welfare Authority of the area where the proposed foster-parent resides not later than seven days before the placing is effected.
- 3. Where a child is dealt with in the manner mentioned in paragraph 2, it is an offence for the foster-parent or any other person to give or receive, or agree to do so, any remuneration whatsoever.
- 4. It is not lawful to offer or seek a child for adoption by advertisement.
- 5. On receiving a notice the Welfare Authority is required to arrange for the supervision of the child until he attains the age of nine years or is legally adopted, whichever event occurs first.

There is one Registered Adoption Society in the Administrative County, viz., the Lichfield Diocesan Association for Moral Welfare Work.

The procedure of the County Welfare Authority is to make a preliminary inspection of the proposed home to ascertain whether a child should properly be received there, and to arrange for monthly visitation during the period of supervision once a child has been placed, the work being undertaken by the Health Visitors.

One child remained under supervision at the beginning of 1945, and 4 notices were received during the year. Four of these 5 children were legally adopted during the period under review, leaving one still under supervision.

CARE OF ILLEGITIMATE CHILDREN.

In the Report for 1944, full information was given of the arrangements made in this respect, in conjunction with several neighbouring Welfare Authorities, with the Lichfield Diocesan Association for Moral Welfare Work, which commenced on the 1st September, 1944, and the only development during 1945 was a decision to continue total financial responsibility, viz., on behalf of all participating Authorities, at the rate of £700 per annum during the year ending 31st March, 1946, subject to adjustment, if necessary, at the end of that year.

When the scheme was inaugurated, it was agreed that the Diocesan Association should furnish to each Welfare Authority by not later than the 30th June in each year a report of their activities during the year ending on the preceding 31st March, and the first ones to be rendered of course, covered the period 1st September, 1944, to the 31st March, 1945. The statement in respect of the County Welfare Area revealed that during this period the number of children brought to notice was 163, and in 130 instances definite results had been obtained by the 31st March, as follows :—

With Mothers .			 	82
Fostered daily .			 	4
In Diocesan Homes.			 	8
With foster-mothers			 	3
With relatives, moth	ner die	ed	 	1
With mother in dom	nestic	service	 	7
At residential nurser	y		 	1
In an Institution .			 	1
Adoption .			 	13
Private Adoption .	andels		 	5
Died			 	5

130

36

Thirty-four girls from the County Welfare Area were sent to Diocesan Homes during the same period.

CARE OF PREMATURE INFANTS.

Circular 20/44 issued from the Ministry of Health relative to the care of premature infants was considered by the Public Health Committee at their meeting in June, 1945, and as a number of the recommendations of the Advisory Committee on the Welfare of Mothers and Young Children involved questions of staff and accommodation which, it was felt, could not adequately be dealt with at that time, particularly the special form of hospital treatment necessary, it was decided to defer consideration of such recommendations until the future of hospitals under the new National Health Service was known.

The cases which could be dealt with at home, of course, came within a different category, and the Committee felt that a useful purpose would be served by making available for loan draughtproof cots, blankets, hot water bottles, etc. They gave instructions therefore, for the provision of such articles which would be stored at 22 centres conveniently placed to serve the whole of the County Welfare Area. It was also decided that the requests for such equipment should emanate from the midwives and should be made to their supervisors, who would visit the babies as soon as possible, giving instructions in the meantime for the issue of the necessary articles, and seeing that everything possible was being done. The appointment of a panel of paediatricians was also decided upon, the County Medical Officer being authorised to invite medical men with the necessary special knowledge to serve thereon.

It was not possible to obtain the equipment mentioned above until towards the end of the year. The question of establishing a panel of paediatricians was pursued, but in view of the inavailability of specialists in this branch of medicine, nothing could be arranged by the close of 1945.

The Ministry of Health also asked for certain records to be kept of premature births, both institutional and domiciliary, and stipulated that every baby weighing $5\frac{1}{2}$ lbs. or less at birth should be included. The following is the information obtained from the County Welfare Area during the period now under review, and embraces all such births which occurred therein whether or not the parents were residents of that area :—

Total No. Notified	Institutional 88	Domiciliary 291
No. who died during the first 24		
hours	4	34
No. who died after the first 24 hours		
but before the 28th day	5	34
No. who survived at the end of one		To Provide T
month	79	223

Of the 291 children born at home, 18 were transferred to hospital, the remaining 273 being nursed entirely at home. Two of the 18 died during the first 24 hours, and five after that period but before the 28th day. These 7 deaths are included in the figures given above under the heading "Domiciliary."

DIPHTHERIA IMMUNISATION.

In November, 1945, the Ministry of Health, issued a circular 194/45, transferring the responsibility for the immunisation of children under 5 years of age from the District Councils to the Welfare Authorities as from the 1st January, 1946: the first mentioned authorities retained responsibility for the protection of children from 5 to 16 years of age. This meant that the County Council had to prepare a scheme to operate in the 17 urban and 10 rural districts comprising their welfare area, where upwards of 9,000 live births occur each year. Needless to say, every effort is made to obtain the protection of each child against diphtheria at, or shortly before, its first birthday. In this connection, the first essential, of course, is to bring the importance of immunisation to the notice of the parents, and the Health Visitors, who are constantly in touch with the mothers and expectant mothers, are the natural source for this work. It was decided, therefore, they should initiate the immunisations and refer the mothers either to the Infant Welfare Centres, where the work would be undertaken by our own medical staff, or to the family doctors, who would give the injections either at their surgeries or at the homes of the children, whichever was mutually found to be more convenient. It was made clear that the parents must be given the choice of procedure.

As far as statistics are concerned, the Ministry of Health decided that the District Councils should continue to be responsible in this respect for all age groups, including the under 5's, and arrangements were therefore made for the completed records of immunisations undertaken under the County Council scheme to be passed on to the local Medical Officers of Health.

The foregoing are the fundamentals on which the County

Council's arrangements were based, and all concerned were given the requisite information and instructions in time for the scheme to operate from the appointed day.

As far as the general practitioners are concerned, it was decided to pay an inclusive fee of 10s. 6d. for each completed case, entailing two injections and a report, no matter where the work was undertaken, the toxoid being obtainable free of charge on application to the central department.

HOME HELPS.

Although the first Ministry of Health circular on this subject, relating to the provision of domestic assistance in the homes of women at the time of their confinements, was issued at the end of 1942, little progress had been made by 1945. The initial difficulty was the inadequacy of the central administrative and accountancy staff, caused by the war, and the matter had of necessity to be left in abeyance, but the position was reviewed on receipt of another circular in May, 1944. This resulted in the adoption of a scheme submitted by the County Nursing Association for the provision of home helps in the rural areas through the agency of the district nursing associations, but little success was immediately attained because, although one or two applications for the service were received, they could not be acceded to as no women could be found in the districts concerned willing to undertake the work. It had been stated that suitable women seen at the Employment Exchanges would be recommended to apply to the Public Health Department through the Health Visitors or Medical Officers of Health, but this did not materialise.

The foregoing was the position at the close of 1944, and there was not further development during the year to which this report relates. The County Nursing Association continued to find it impossible to obtain the requisite assistance, and, in fact, were able to deal with one case only during the whole of the period.

DOMESTIC HELP.

Ministry of Health Circular 179/1944 and Defence (General) Regulation 68E., regarding the provision of domestic help for persons sick or infirm (whether through old age or otherwise) who are unable to obtain domestic help of which, under present circumstances, they are particularly in need, were considered by the Public Health Committee at their January, 1945, meeting. The proposed arrangements had no connection with the provision of home helps for women at the time of their confinements, and in the Ministry's view the types of cases to which additional attention should now be given were as follows :---

- (a) where the housewife falls sick or must have an operation;
- (b) where the wife is suddenly called away to see her husband in hospital and arrangements have to be made to look after the children;
- (c) with elderly people who were infirm, or one of whom suddenly falls ill;
- (d) where several members were ill at the same time, e.g., during an influenza epidemic.

It was not suggested that an organised service should be established in rural areas, but if the authority of a rural area considered that special circumstances existed, these should, in the first place, be brought to the notice of the Ministry.

The circular commented on rates of pay, recovery of costs etc., and stated that reasonable expenditure incurred in the powers conferred by the Regulations would be re-imbursed by the Ministry of Health. It was further laid down that a County Council may with the concurrence of the Council of a County District delegate to such Council, with or without restrictions or conditions as they think fit, any of its powers under the Regulations, and where powers are so delegated the Council of the County District in the exercise of its powers would act as agents of the County Council.

It was decided to ascertain the views of the Borough and Urban District Councils in the County Welfare Area as to whether such a scheme could be established in their areas at the present time, and to what extent they would co-operate, and, in addition, to inquire whether the Ministry would have any objection to the County Nursing Association or other organisation of good standing carrying out this work on behalf of the County Council in areas which could not conveniently be dealt with otherwise.

By June, 1945, communications had been received from most of the Borough and Urban District Councils, and whilst in some instances the Councils intimated they would be prepared to accept delegation or would co-operate with the County Council, others were of the opinion the scheme could not be satisfactorily pursued in their particular areas owing to the difficulty of obtaining women prepared to undertake the duties. It was then decided that where Local Authorities had already expressed, or subsequently expressed, their willingness to co-operate, they be appointed to act as agents of the County Council subject to certain requirements as regards expenditure, claims for re-imbursement, funds, records, clerical and supervisory staff, and that the local Authorities who had not agreed to co-operate be asked to reconsider their decisions. It was further resolved that the County Nursing Association be invited to assist in those districts where the local Councils finally decided not to act as agents of the County Council.

Nothing of a material nature transpired during the remainder of 1945, and at their meeting in January, 1946, the Public Health Committee were informed :—

- 1. That the following Urban District Councils had agreed to act as agents of the County Council—Aldridge, Amblecote, Kidsgrove, Leek, Rugeley and Willenhall.
- 2. That the following had intimated that for various reasons they were not prepared to accept delegation—Biddulph, Darlaston, Lichfield, Stone, Tettenhall and Uttoxeter.
- 3. That the following still had the matter under consideration —Brownhills, Sedgley, Tamworth and Wednesfield.
- 4. That the Brierley Hill Urban District Council could not see their way to act as agents of the County Council on the terms stipulated, but would be prepared to accept delegation provided it was absolute and under seal. This Council was informed that the County Council could not see their way to modify the terms and conditions already decided upon.

HEALTH VISITORS.

There has been no change in the normal complement of Health Visitors, which consists of 60 whole-time, two of whom are Lecturers on Mothercraft, and 42 part-time, *i.e.*, District Nurses employed by local Associations whose work is mainly in the rural districts. The whole-time Health Visitors serve a population of approximately 377,960 out of the total of 458,840.

The adverse position as regards filling vacancies caused by resignation and retirement continued throughout the year, and at the end of the period the staff was depleted to the extent of twelve Health Visitors and one Lecturer, as compared with six and one, respectively, at the close of 1944.

The visits paid by the Health Visitors during the year were as follows :---

To expectant mothers :-	-		
(Î) First Visits			1,895
			5,875
To infants under one ye	ar :—		
(1) First visits			8,648
(0) T 1 1	,		66,147
To children-one-five ye	ears :-	-	
Total visits			91,790

In 1945 the Health Visitors reported to local Medical Officers of Health 116 instances of insanitary conditions.

TRAINING OF HEALTH VISITORS.

The difficulty of obtaining health visitor candidates, and the fact that there were already many unfilled vacancies, prompted the Public Health Committee at their June, 1945, meeting to consider this question, their attention having been drawn to the fact that certain other Authorities were paying for the training as health visitors of fully trained nurses who had passed Part I of the Midwives' Certificate Examination. A training centre, which has to be associated with a University and recognised by the Ministry of Health, was available at Birmingham, and we had been invited to participate in the arrangements. Broadly speaking, the proposed scheme provided that a pupil health visitor would be appointed for a period of twelve months by the Authority sending her for training at one-half the minimum of the Rushcliffe salary scale for a trained health visitor, plus £6 for uniform, that her training would extend for a period of $7\frac{1}{2}$ months, after which the examination for the certificate would be taken, and that the remaining 41 months would be spent in the service of the Authority concerned. She would then proceed to the full minimum salary, with allowances, etc., provided by the Rushcliffe recommendations, and remain in the service of the Authority who sent her for training for a further period of not less than twelve months. It was also provided that the Authority sending candidates would be responsible for the cost of the course, administrative expenses and examination fees.

The Public Health Committee decided to enter into an arrangement with the Birmingham City Council for the training of health visitors, and that a maximum of five places be requested for the year 1946, the position to be reviewed in succeeding years.

LECTURES ON MOTHERCRAFT.

The lectures to mothers, which were instituted fourteen years ago, continued at the Infant Welfare Centres, with one lecturer only, as the second appointment which became vacant in September, 1944, has not yet been made.

During the year talks were given at 197 sessions of 26 Centres in various parts of the Maternity and Child Welfare Area, the total attendance being 6,055.

INFESTATION BY HEAD LICE.

As stated in previous Reports, the Health Visitors, whose

duties are combined with those of School Nurse, undertake the necessary work in this respect, the aim being to combat to the fullest extent any possible increase of infestation caused by overcrowded homes, the absence of mothers at work, etc. The condition of the hair is tactfully included in examinations at the homes and Welfare Centres, and advice given as regards prevention and, where necessary, treatment. Sacker Hygienic Combs are available for sale at cost price, and talks on the care of the hair are included in the syllabus of the Lecturer on Mothercraft who talks to groups of mothers at the Welfare Centres.

WARTIME NURSERIES.

During 1945 four of these nurseries were discontinued, viz., Kidsgrove (Butt Lane) 28th February, Rugeley 26th May, Brierley Hill (Hill Street) 31st August, and Darlaston 25th December, the following being the list of those still in operation at the close of the year :—

		Dec. Quarte	r, 1945
Situation	Places provided	Av. daily at- tendance	Av. cost per daily attendance
D 1 1 TT11 (D		1 00 0	s. d.
Brierley Hill (Pensnett)	40 (whole-tu	me) 23.6	5 5
Kidsgrove (Liverpool Rd.	.) 50 ,, ,,	33.3	4 7
Leek	40 (part-tim	e) 22.4	5 2
Tamworth	40 (whole tin	me) 23.9	6 3
Wednesfield	50 ,, ,,	32.0	4 6
Willenhall (Pinson Park)	50 ,, ,,	45.7	3 10
Willenhall (Russell St.)	40 ,, ,,	000	5 1

Part-time for children from 2-5 years of age.

Whole-time-for children of all ages to 5 years.

The residential nursery with 12 places at Hoar Cross Hall (Tutbury R.D.) for the children of women employed at Birmingham, which was established at the instigation of the Ministry of Health and supervised by the County Council, was closed on the 17th September, 1945. In the same month St. Mary's Mount, Uttoxeter, which had been subject to some supervision, ceased to function as a residential nursery provided by the Waifs' and Strays' Society.

DENTAL LABORATORY

There was no further development of this Laboratory during 1945, which continued with its reduced complement of three mechanics throughout the period under review.

incompator co	mpici	cou wor	r aann	g une ye	ai wa	15 a5 101
New Dentures	:			in and		
Full Upper						324
Full Lower						259
Partial						197
Remakes						64
						844
Sundries :	1	- Section 1	(C) TOTAL			
Orthodontic			constru	cted		35
Repairs to d	lentu	res				91
Acrylic teet	h mo	ulded a	nd prod	cessed		180
Obturators t						2
Acrylic Crov						3
Repairs to s						9
Special tray						77
						397

COUNTY BACTERIOLOGICAL LABORATORY

Dr. J. L. Edwards, the County Bacteriologist and Pathologist, reports that during 1945, 106,778 investigations were conducted at the County Bacteriological and Pathological Laboratory. Of these, 67,609 were of a general bacteriological and serological nature, 7,429 in respect of biochemical and pathological investigations, and 31,740 were for the diagnosis of venereal diseases and tests for cure. The total numbers of investigations made in 1944 and 1943 were 115,034 and 123,640, respectively.

The general bacteriological and serological work was for the most part from the Administrative County, but of the milk examinations 1,148 were undertaken for the City of Stoke-on-Trent.

The tests for venereal diseases were from patients resident in the following areas :---

Administrative County (General)	11,311
,, ,, (Emergency	
Hospitals)	313
Members of His Majesty's Forces	1,340
City of Stoke-on-Trent	9,921
County Borough of Dudley	2,674
County of Worcester	834
Kesteven Division of Lincolnshire	1,187
County Borough of Walsall	1,775
County of Nottingham	1,486
	193
Other areas outside the Administrative	
County	706

44

Langelout	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Totals
Water Examinations	76	81	119	124	400
Milk Examinations	3,153	4,016	3,778	3,630	14,577
Diphtheria	6,651	6,599	4,971	5,146	23,367
Tuberculosis	2,014	1,821	1,895	1,652	7,382
Cerebro-spinal Fever	4	12	18	3	37
Streptococcal Infections	1,245	1,332	1,180	1,399	5,156
Ringworm	16	9	10	17	52
Typhoid and Paratyphoid Fevers	144	241	297	209	891
Brucella Infections (Human)	33	65	73	51	222
Dysentery (all types)	303	939	419	347	2,008
Food Poisoning	71	142	180	171	564
Typhus	-	9	96	51	156
Veterinary Work (other than Milk, including Research)	2,025	1,563	1,440	1,755	6,783
Medico-Legal Work	PD:	-	3	-	3
Other Examinations	1,422	1,691	1,450	1,448	6,011
TOTALS	17,157	18,520	15,929	16,003	67,609

GENERAL BACTERIOLOGY AND PATHOLOGY.

The 14,577 "Milk Examinations" were constituted as follows :---

Cleanliness and Phosphatase Tests	 12,180
Biological Tests	 2,312
Investigations for Brucella infections	 43
Cultures for Streptococci, etc	 8
Examinations of washings from churns	 29
Examinations of milk bottles for sterility	 3
Direct films for acid-fast bacilli	 2
	14 577

As regards the biological, cleanliness and Phosphatase examinations, the purposes of the tests are shown in the accompanying table, and it will be specially noted that one sample of pasteurised, six samples of "Accredited" and four of "Tuberculin Tested," gave positive biological reactions for tuberculosis.

about Merrich		* Coli and/or Reductase ; or Count and Phosphat- ase.			Biological Tests.		
	Satis- factory.	Unsatis- factory.	Total.	Nega- tive.	Posi- tive.	Total.	Total.
For "Accredited" Standard and Licence	6330	1351	7681	74	6	80	7761
For "Tuberculin Tested" Standard and Licence	295	59	354	185	4	189	543
For "Tuberculin Tested" (Pasteur- ised) Standard	32	-	32	6		6	38
For Pasteurised Standard	263	54	317	40	1	41	358
Food and Drugs Act, 1938	1666	525	2191	1217	63	1280	3171
School Milks	61	19	80	63	1	64	144
Submitted by farmers, retailers and others, for their own informa- tion	-			1	-	1	1
Submitted by Ministry of Agriculture and Fisheries under Tuberculosis							
Order, 1938	-		-	573	61	634	634
Totals	8647	2008	10655	2159	136	2295	12950

* The above figures represent the number of samples examined.

The following tests were involved :---

Count and/or	r Coli		S	all on h	 983
Reductase					 10,517
Phosphatase					 680
Biological					 2,295
·	Tot	al			 14,475

46

The particulars of the pathological and biochemical investigations were as follows :---

PATHOLOGICAL AND BIOCHEMICAL WORK CONDUCTED DURING THE YEAR 1945 Gastric Contents. Fractional Test Meals ... 764 Blood. Estimation of Urea 637 Glucose .. 184 ,, ,, . . 1,128 ,, Hæmoglobin Cytological Examination of Films 2 R.B.C. Count 1,116 Leucocyte Count 1,155 Differential Leucocyte Count ... 1,157 Reticulocytes 107 Wintrobe's Volume Index 102 Icterus Index 101 Sedimentation Rate 11 Van Den Bergh Reaction 35 Fragility of R.B. C's ... 3 Platelet Count 6 Arneth Count 1 Estimation of Calcium ... 10 " Phosphorus 7 ,, " Phosphatase 11 ,, " Pyruvic Acid 6 ,, " Protein .. 45 .. ,, " Chlorides 5 ,, " Cholesterol 21 ,, " Sodium .. 3 . . ,, " Uric Acid.. 3 ,, . . " Creatinine 1 ,, Potassium 4 ,, . . Phosphates 1 ,, Diastatic Index ... 1 Formol Gel Reaction 3 Grouping 18 Spectroscopic Examination 1 Urine. Estimation of Urea 223... " Glucose ... 2 ,, " Stercobilin 2 ,, . . 2 " Total Protein . . ,,

17-Keto Steroids				5
Estimation of Creatine				1
" " Creatinine		••		1
,, ,, Vitamin B.	••	• •	•••	1
Zondek-Ascheim Tests (Friedr	···	modifie		1
tion)	nan s	mouni	a-	2
Diastatic Index	•••	•••		1
Fæces.				10000
0				1
Quantitative Estimation of Fa				17
Estimation of Calcium	11.5			1
", ", Stercobilin				7
" " Bilirubin				1
Sternal Marrow.		••	•••	1
Differential Leucocyte Count				2
Cytological Examination	•••			1
Cerebrospinal Fluid.	••	•••		1
Estimation of Bromide				1
	••	••	••	1
Other Body Fluids. Biochemical Examination				1
	••	••		1
Estimation of Protein	•••		••	1
Examination of Calculus	••		••	1
Human Organs and Tissues.				
Sulphonamide Content	•••	••	• •	1
Schaudinn Films.				
Sputum		• •		1
Other body Fluids				2
Pathological Sections	••	••		502
	. 1			= 100
. Tot	tal	••	••	7,429

The details of the Venereal Diseases tests are shown in the following table :----

EXAMINATIONS OF PATHOLOGICAL SPECIMENS CONDUCTED UNDER THE VENEREAL DISEASES SCHEME DURING THE YEAR 1945.

	For Detection of		For	Sigma	Other	Tetala
a here	Spirochæta Pallida	Gonococci	Wasser- mann Reaction	& Kahn Tests	Examin- ations	Totals
1st Quarter	_	479	2671	3870	1099	8119
2nd Quarter	1.	461	2642	3645	963	7712
3rd Quarter	-	421	2716	3557	1014	7708
4th Quarter		444	.2888	3961	908	8201
Totals	1	1805	10917	15033	3984	31740

48

The 3,984 "other examinations" consisted of :--

Three hundred and twenty-nine cerebrospinal fluids for cells count, protein estimation, and colloidal gold test; 3,646 complement fixation tests for gonorrhœa; the examination of 2 specimens of urine and 5 cultures for gonococci; and 2 pathological sections.

CHEMICAL LABORATORY

Mr. E. V. Jones, the County Analyst, reports that the total number of samples analysed was made up as below :— For County :—

	Food and Drugs Act, 1938				1,906
	"Appeal to Cow" Samples		India 10	a stign	20
	Pharmacy and Poisons Act, 1				4
	Drinking Waters			1	354
		••			1
	Swimming Bath Waters	••			and the second se
	River Waters (Full Analyses)				152
	,, ,, (Partial Analyse				51
	Sewage Effluents (Full Analys	ses)			77
	Coroner Samples				4
	Miscellaneous Samples		h		24
	inthint on Barriss 21 (No 2 months				
					2,593
For	Stoke-on-Trent C.B.C. :				he unini
-				845	
	Food and Drugs Act, 1938	•••		20125	
	"Appeal to Cow" Samples		1000	7	
1	Fertilizers and Feeding Stuffs	Act,	1926	1	
	Miscellaneous Sample		-1. · · ·	5	
	the atked, to give assistance,				858
For	Brierley Hill U.D.C. :				
	Food and Drugs Act, 1938		ni mase	53	
	"Appeal to Cow " Samples			4	
	Appear to cow Sampies			-	57
Ean	Normagetla under Luma M.P.C.			100	01
For	Newcastle-under-Lyme M.B.C				
	Food and Drugs Act, 1938			97	
	Miscellaneous Samples			1	
	1967 were imposed, togethere				98
For	Rowley Regis M.B.C. :				
-	Food and Drugs Act, 1938				110
		1 M 19			
	To	tal			3,716
	AND				1

FOOD AND DRUGS ACT, 1938.

Of the 1,906 samples submitted from the County Area, 1,714

were found to be genuine and 192 adulterated or below standard ...

(1) MILK.—Of 1,426 samples of undesignated milk, 167 were: found to be unsatisfactory, of which 62 contained added water, 6 contained added water and were further deficient in fat, 79 were deficient in fat and 20 were deficient in fat and solids-not-fat.

Ninety-three samples of specially designated milks were examined, viz. :-20 "Tuberculin Tested," 21 "Accredited," 51 Pasteurised, and one "Tuberculin Tested" Pasteurised. Ten were reported against : 3 "Accredited" contained added water, 5 "Accredited" and one "Tuberculin Tested" were deficient in fat, and one "Accredited" was deficient in fat and solids-not-fat.

Forty samples of Sterilized milk were also examined, of which 3 were found to contain added water; one of these was also deficient in fat.

Action taken.—One hundred and two of the 167 unsatisfactory samples of ordinary milk were informal and no direct action could be taken, but "follow up" samples were obtained where possible. The remaining 65 formal samples were dealt with as follows :—

In 24 cases, representing 25 unsatisfactory samples the adulterations were small and cautions were issued. Eight producers or retailers were prosecuted in respect of 15 samples containing added water, and one in respect of a sample deficient in fat. The remaining 24 cases were noted for further sampling.

As regards the formal samples of designated milks, one producer was prosecuted in respect of 2 samples of "Accredited" found to contain added water, and a caution was issued in respect of a sample of "Tuberculin Tested" which was deficient in fat. The Staffordshire Farm Institute was asked to give assistance to a producer from whom 5 "Accredited" samples, found to be deficient in fat, had been taken. The remaining 2 "Accredited" samples, one containing added water and the other being deficient in fat and solids-not-fat, were informal. Two cautions were also issued in respect of 3 samples of sterilized milk. Two contained added water and one was deficient in fat.

In total, 27 producers or retailers were cautioned and 10 prosecuted. Fines amounting to £67 were imposed, together with £9 10s. 6d. special costs.

The average composition of the milks of all grades was :--

		0	n all Samples	On genuine Samples
Fat			9 010/	3.69%
Solids-not-fat			8.71%	8.74%
Of 1,379 sample	es of	milk	of all grades,	passed as genuine,

213 were below the presumptive standard of 8.5 per cent. solidsnot-fat, of which 212 were proved by the Freezing Point Depression (Hortvet) to be genuine milk, and one was sour.

(2) GENERAL ARTICLES OF FOOD.—Three hundred and fortyseven general articles of food and drugs were examined, and 12 (all informal) were found to be adulterated or below standard, the County Analyst reporting as follows :—

"Baking Powder.—Of 12 samples (one formal and 11 informal), 3 informal samples contained only 5.37, 5.80 and 6.11 per cent. available Carbon Dioxide, instead of at least 8 per cent., thus showing deficiences of 32.8, 27.5 and 23.6 per cent., respectively."

"Jam, Raspberry, Full Fruit Standard—Of 2 samples, both informal, one was 11.5 per cent. deficient in fruit content, containing only 17.7 per cent. fruit, instead of 20 per cent.

"''Kako,' Unsweetened—Only 2 informal samples were submitted, both of which were reported against, as they contained live acari.

"Mustard-Of 3 samples, all informal, one was deficient in allyl-isothiocyanate.

"Paste, Bloater-Of 2 samples, both informal, one was 28.7 per cent. deficient in fish, containing only 46.34 per cent. instead of at least 65 per cent.

"Paste, Meat—Of 6 samples, all informal, 3 were 10 per cent. deficient in meat, containing only 45 per cent. instead of at least 50 per cent.

"Sponge Fudding.-Of 2 samples, both informal, one was alive with acari."

" APPEAL TO COW " SAMPLES.

Of 20 "Appeal to Cow" samples, 7 were below the presumptive standard of 8.5 per cent. solids-not-fat and 3 per cent. fat; one was deficient in solids-not-fat, 5 in fat and one in both fat and solidsnot-fat.

CORONER SAMPLES.

The four samples submitted were in respect of two cases and were examined for metallic, alkaloidal and other poisons.

DRINKING WATERS.

Forty-six of the 354 samples were for special examination viz. :-45 for lead content and one for full and mineral analysis.

Of the remaining 308 samples, 200 were of satisfactory quality ;

52 contained sewage or animal matter; 16 were organically impure; 16 were of doubtful quality; 3 contained metallic contamination; 5 were excessively hard; 6 showed both sewage and organic pollution: 4 showed both sewage and metallic pollution; 1 contained sewage, vegetable and metallic contamination; 3 contained sewage and were also excessively hard; 1 contained metallic contamination and was excessively hard; and 1 showed organic and metallic polution as well as excessive hardness.

MILK SUPPLY

The County Council are concerned with the milk supply as follows :—

- (i) Under the Milk (Special Designations) Orders they are responsible for the issue and control of "Tuberculin Tested" and "Accredited" licences in the Administrative County, and
- (ii) By arrangements made with the majority of the District Councils, the County Staff undertake the sampling of milk as it is being retailed to the public *i.e.*, street samples.

The appropriate duties in connection with the above are assigned to the Sanitary Inspectors and Milk Sampling Officers of the Public Health Department and normally there are four of each, the former also undertaking other work of a public health nature. In view of the war, at the end of 1941 these staffs had been reduced to two and three, respectively, but as far as possible efficient supervision is being maintained.

Details of the work during 1945 are given in the succeeding paragraphs.

STREET SAMPLING.

The County Council are ordinarily responsible for this purpose for the whole of the Administrative County with the exception of the Municipal Boroughs of Newcastle and Rowley Regis and the Urban District of Brierley Hill. In addition, by arrangement, the County Council staff undertake street sampling for the Rowley Regis Municipal Council, one of the separate Food and Drugs Authorities.

In the following tables the numbers of samples of specially designated and ordinary milks taken during the year in the area for which the County Council is normally responsible are shown, together with the results of the bacteriological and biological tests carried out in the County Laboratory. In the table of ordinary milk the numbers of samples taken in the various Sanitary Districts of the County are indicated.

SPECIALLY DESIGNATED M	MILK.
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IST .	ANUARY	TO 31st	DECEMBER,	1945.
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		No. of	Result of	Examination	
Designation		Samples	Clear	nliness	T.B.
could be taken		Submitted	Satisfactory	Unsatisfactory	
"Tuberculin Tested " "Accredited " Pasteurised "Tuberculin Tested "		45 (8) 49 (10) 99 (80)	41° 40 72	4 9 27	1 3 1
Pasteurised	• •	16 (9)	15	1	
Totals		209 (107)	168	41	5

- 1	ST	ANUARY TO	31st Decem	BER, 1945.	
		No. of	Result of	Examination	2-10
Sanitary District		samples.	Clear	T.B.	
		Submitted	Satisfactory	Unsatisfactory	THE SALL
URBAN :			· · · ·		
Aldridge Amblecote		29(8)	22	7	1
Biddulph		2(2) 36(1)	$2 \\ 21$	15	
Bilston		28 (1)	23	5	1
Brownhills		32 (2)	20	12	• 2
Cannock		75 (8)	62	13	4
Coseley Darlaston	• •	29 (3)	20 4	9	1
Kidsgrove		33 (12)	24	9	1
Leek		66 (7)	46	20	
Lichfield		11	8	3	$\frac{2}{1}$
Rugeley		29 (5)	22	7	5
Sedgley	• •	24	19	5 9	1
Stafford Stone	• •	$ \begin{array}{c} 61 & (26) \\ 34 & (3) \end{array} $	52 32	2	3 5
Tamworth		25 (2)	25		1
Tettenhall		12 (2)	10	2	
Tipton		13 (10)	11	2	10000000
Uttoxeter	• •	12	10	$\frac{2}{2}$	1
Wednesbury Wednesfield		$11 (6) \\ 16 (2)$	9 13	23	
Willenhall	• • •	$ \begin{array}{r} 16 (2) \\ 46 (1) \end{array} $	25	21	1
· · · · · · · · · · · · · · · · · · ·		10 (1)	801 1000	100	T -
RURAL :			and interply the	portugality for the log	
Cannock	• •	76	62	14	1
Cheadle Leek	• •	90 (8)	70 75	20	4
Lichfield		93 (2) 77 (10)	75 60	18 17	2 9
Newcastle		39 (5)	27	12	2
Seisdon		24 (10)	19	5	$\begin{array}{c}4\\2\\2\\2\\2\\3\end{array}$
Stafford		33	23	10	3
Stone	• •	45 (1)	35	10	-
Tutbury Uttoxeter	• •	$33(5) \\ 34(2)$	22 26	11 8	
OttoActer	• •	04 (2)	20	0	
Totals		1172 (144)	899	273	46

ORDINARY MILK SAMPLES. 1st January to 31st December, 1945.

Figures in brackets show numbers of samples not submitted to the Biological Test.

In addition, 97 samples of sterilized milk were taken for examination, and were all satisfactory.

(i) BACTERIOLOGICAL EXAMINATION.

Undesignated Milk.—Of the 1,172 samples bacteriologically examined, 899 were found to conform to a certain standard of cleanliness, the remaining 273 failing to do so. Two hundred and fifty-six of the latter were produced within the County and 17 outside. The percentage of samples reported clean was 76.7 compared with 77.8 last year. In addition to being unsatisfactory from a cleanliness standpoint, 8 also contained tubercle bacilli.

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As in previous years, the names of the producers of the unsatisfactory milks were reported to the County Farm Institute, and the farmers concerned were communicated with by the Assistant Director of Agricultural Education, and offered every assistance. In accordance with the usual practice, if no improvement in the cleanliness of the milk resulted, the District Council in whose are a the premises are situated was informed, so that the necessary steps could be taken under the Milk and Dairies Order, 1926.

Specially Designated Milks.—The cleanliness test was applied to the 209 samples submitted, and 41, or 19.6 per cent., were found to be unsatisfactory, viz. :—4 "Tuberculin Tested," 9 "Accredited," 27 Pasteurised and 1 "Tuberculin Tested" Pasteurised, as compared with 16.5 per cent. in the previous year.

In addition to examination by the bacterial count method, the Pasteurised milks are submitted to the phosphatase test, which indicates the efficiency or otherwise of the pasteurisation. In this respect, 111 cf the 115 samples obtained in 1945 were satisfactory.

As regards the unsatisfactory samples, other than those of Pasteurised milk, 11 were produced in the County and 2 outside. The sources of production of the 28 Pasteurised samples were not known but 22 were of milk treated at premises outside the County. (ii) BIOLOGICAL EXAMINATION.

With the exception of 144 of ordinary and 107 of designated milks, 89 of the latter being Pasteurised, the samples were examined biologically, and 46 of ordinary milk, 1 of "Tuberculin Tested," 3 of "Accredited" and 1 of Pasteurised, were found to contain tubercle bacilli.

Forty-three undesignated samples, the one "Tuberculin Tested" and 3 "Accredited," were produced within the County. Where the milk was produced in Staffordshire the positive results were reported to the Divisional Inspector of the Ministry of Agriculture and Fisheries, whose Department is responsible for the consequent veterinary examinations of the herds concerned.

The procedure adopted when the sources of production of samples containing tubercle bacilli are outside the County is dealt with in a succeeding paragraph.

MILK IN SCHOOLS SCHEME.

At the end of the year there were 111 suppliers of designated and undesignated milks to schools or departments, as detailed in the following table :—

	ins land		o. of ppliers	Schools or Depts. supplied	Children supplied (Dec).
" Tuberculin Te	sted "	 	3	3	137
" Accredited "		 	73	112	7,598
Pasteurised		 	18	275	47,118
Undesignated		 	17	21	1,041
				Min-min 10	and the second second
			111	411	55,894
				1 1 1 1 1 1 1 1 1 1 1 1	and the second second

The usual procedure is to sample the supplies at least once each term *after* delivery to the schools. During 1945, however, in view of shortage of staff, this was not always possible, but every effort was made to give adequate supervision. The samples are examined bacteriologically and biologically, and, in the case of Pasteurised milk, by the phosphatase test in addition.

All herds producing milk are, of course, under supervision by the Veterinary staff of the Ministry of Agriculture and Fisheries, but, in the case of undesignated production, examinations are normally made less frequently. However, as far as school milk is concerned, the Divisional Inspector agreed to deal with the matter adequately, so that the supplies, which are in districts where it is difficult to obtain designated milk, can continue.

The number of samples collected at schools during the year was 82, and of these 16 failed to conform with the required standard of cleanliness. When an unsatisfactory result is obtained notification is made to the supplier and/or producer, and repeat samples are taken.

Thirteen samples from Pasteurised supplies were submitted to the phosphatase test, one only being unsatisfactory

As regards the biological examination of samples, where tubercle bacilli are found the school supply is cancelled immediately and is not resumed from the particular source until the herd is free from infection. In the meantime, where possible, alternative arrangements are made so that the scheme is not interfered with. The number of tuberculous samples during the year was 2 and the procedure mentioned in a preceding paragraph was adopted. FOOD AND DRUGS ACT, 1938.

In 1945, 64 representations in respect of milk produced in Staffordshire, which was found to contain tubercle bacilli, were made by Medical Officers of Health of districts outside the area administered by the County Council. Similarly, 3 complaints were made to outside Authorities in respect of milk sent into this County for sale. In this respect the County and County Borough Public Health Departments act in the capacity of clearing houses only, and the appropriate action regarding the herds is taken by the Veterinary Staff of the Ministry of Agriculture and Fisheries.

MILK (SPECIAL DESIGNATIONS) ORDER, 1936.

"Accredited."—On the 31st December, 1945, there were 2,569 farmers licensed to produce "Accredited" milk, as compared with 2,575 at the end of the previous year. During the period under review, 7,396 samples of milk were taken for examination for cleanliness, and 6,119, or 82.7 per cent., complied with the required standard.

As stated last year, in view of depletion of staff, routine sampling at the farms at two monthly intervals had to be abandoned but endeavours are made to visit quarterly for this purpose.

Ninety-four applications for new licences were granted during 1945.

When it is found that the main conditions attached to a licence, which include, of course, a good sample record, are not being observed, every effort is made to obtain a satisfactory solution, and failing this the case is dealt with by the appropriate Committee. During 1945, the licences of 11 producers were revoked and 1 caution was issued.

"*Tuberculin Tested.*"—At the end of the year the number of licences in force for the production of "Tuberculin Tested" milk was 96, as against 78 at the close of 1944. Eighteen new applications were received and recommended during 1945.

The routine samples are examined biologically as well as for cleanliness. Of 220 obtained during the year, 24 failed to comply with the required bacteriological standard and 2 were found to contain tubercle bacilli.

GENERAL.

Apart from the foregoing, sampling was undertaken at certain

hospitals, sanatoria and institutions, and, of 23 samples obtained during the year, 5 were unsatisfactory from a cleanliness standpoint. None was found to contain tubercle bacilli.

WATER SUPPLIES, SEWERAGE AND SEWAGE DISPOSAL

As stated in the later wartime Reports, of recent years little has been possible as regards the augmentation of existing schemes and the provision of new ones, and there is little to mention on this occasion.

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Last year, the Rural Water Supplies and Sewerage Act, 1944, was introduced, which is of particular interest to the Rural District Authorities, although not confined to them, and provides for financial assistance by the Treasury towards the cost of providing water and sewerage schemes, the County Council being required to make a contribution similar to that decided upon by the Ministry. It is intended that all needs shall be adequately provided for, viz., groups of cottages, schools, the farming industry, etc., and hoped that, apart from the resumption of postponed activities due to the war, the preparation of other schemes will be proceeded with.

At their June, 1945, meeting, the Public Health Committee received Ministry of Health Circular 119/44, which requested the Local Authorities to consider the application of the 1944 Act to their areas, so that the preliminary work could be disposed of. The Minister intimated that, whilst it was still impossible to consider actual applications for grant or the execution of works under the Act, there was much planning which could be done straight away, so that the schemes could proceed without further delay as soon as it was possible to give the word. The Committee were informed that some time previously a conference with certain Local Authorities had been held in connection with a scheme proposed by the Leicester Corporation, when the opportunity was taken of reminding them of the additional requirements of this Act. As the Minister was anxious that the County Council should, as far as possible, co-ordinate within the county the action taken and to be taken by constituent Local Authorities, a circular was addressed to all such Authorities requesting them to enable the matter to be considered and to state quite generally whether any steps had been taken in their respective areas, and intimating that if the local Council had not already appointed a Consulting Engineer to advise on the schemes, they should bear in mind the desirability where a comprehensive scheme is contemplated involving a neighbouring Authority of appointing a joint consultant.

During 1945, the County Council instructed a Consulting Engineer to prepare a comprehensive report on existing water supplies, sewerage and sewage disposal works, covering the whole of the county.

A further Ministry of Health Circular, i.e., 218/45, was considered at the January, 1946, meeting. This called the attention of the District Authorities to Section 2(2) of the 1944 Act, under which they are required to consult the County Council before submitting schemes to the Minister, and to report to him the observations, if any, of the County Council. The Minister expressed the hope that the County Councils would, as far as practicable, press forward the work of examining and reporting on the proposals of local Authorities in their areas in order that there shall be no avoidable delay in the submission of schemes. It was stated that the question of the amount of the contribution which a County Council will make under Section 2(1) of the Act, towards the cost of a scheme need not be settled before the scheme is submitted to the Minister with the County Council's observations.

As far as this County Council is concerned, during 1945 the following schemes submitted under the Rural Water Supplies and Sewerage Act, 1944, were considered.

WATER SUPPLIES.

Kidsgrove U.D.

It was stated that the water supply in the Talke Ward had been inadequate for some years, and that increased consumption, together with the prospect of an early resumption of building activities, accentuated an already serious position, as for some time it had been impossible to maintain a full 24 hours supply. Several methods of attaining the desired result were considered, the County Council being of the opinion it would ultimately be more economical for the Urban District Council to obtain an additional supply from the Newcastle Rural District Council, and they approved proposals for obtaining such a supply from the existing sources at Audley.

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Stafford R.D.

The Rural District Council intimated they were anxious to proceed with that portion of their western area water supply scheme affecting parts of the Parishes of Gnosall, High Offley, Ranton and Ellenhall, as it was considered these areas were in urgent need for domestic and agricultural purposes. It would also enable the District Council to proceed with the erection of a substantial number of new houses during the first two post war years, and provide water for a large number of existing dwellings inadequately supplied from shallow wells. Unless the curtailed scheme could be proceeded with as suggested, the intentions mentioned would be impossible, as no alternative satisfactory supplies of water were available.

The County Council promised their support, but later on the Ministry of Health suggested a further curtailment, *i.e.*, the provision of a piped supply for a part of the village of Gnosall only, and this proposal, together with the whole question was again considered by the County Council. As a result, it was decided to support the District Council's proposal that the full scheme should be proceeded with as soon as possible, with immediate action as far as the village of Gnosall, where the majority of the new houses were to be erected, was concerned.

Tutbury R.D.

The provision of new mains by the South Staffordshire Waterworks Company was proposed for supplying water in the Parishes of Anslow, Barton-under-Needwood, Dunstall, Tatenhill, Wichnor and Yoxall, including Hoar Cross, and the County Council decided to support the scheme.

SEWERAGE AND SEWAGE DISPOSAL.

Lichfield R.D.

The provision of a sewerage and sewage disposal scheme for Armitage and Longdon was proposed, as it was considered that if the proposals were agreed a much higher standard of sanitation would be possible in the areas involved, where three streams were being heavily polluted, and where there were many houses on the conservancy system requiring conversion. The County Council decided to support the scheme in principle.

Newcastle R.D.

The Rural District Council submitted a report by their Consulting Engineer on the Dunkirk area of the Parish of Audley Rural, with approximately 20 houses, and it appeared that the conveyance of the sewage direct to the Audley Disposal Works, or to the main sewage system, would be uneconomical. It was decided that the Rural District Council be requested to consider the construction of a small disposal installation near to the properties, with the effluent discharging into the stream, as this would be a less costly alternative to providing main sewerage facilities.

Stafford R.D.

A scheme of sewerage and sewage disposal was submitted, including the provision of sewers, pumping station and sewage treatment, in the Parishes of Baswich and Brocton, to serve Walton, Milford and Brocton. It was decided that, in view of circumstances reported relative to the inadequacy of the Stafford Borough sewage disposal works and the possible extension of these works, or alternatively, the provision of works on a new site, which could also deal with the disposal of sewage from the Parishes concerned, consideration be deferred.

Later, further consideration was given to the proposals when the County Council approved the proposed sewerage arrangements outlined in the District Council's scheme, but decided again to defer consideration of the proposals relating to sewage disposal until the future intentions of the Stafford Corporation were known.

In each instance where the County Council agreed to support a scheme, consideration of grant had, of necessity, to be deferred until the views of the Minister of Health on the proposals were known.

MINISTRY OF HEALTH INQUIRIES.

The follow	ing]	Inquiries	were held during	the year 1945 :
District		Date	Amount of Loan	Purpose
Lichfield City		27.2.45	£ 26,500 (1939) 42,500 (1945)	Sewage Disposal
Stone U.D		15.3.45	7,375	Sewage Disposal.
Lichfield RD (Armitage with Handsacre and Longdon).	•••	28.3.45	23,670	Sewerage and Sewage Disposal.

CONTRIBUTIONS TO DISTRICT COUNCILS FOR WATER AND SEWAGE DISPOSAL SCHEMES.

In the Report for 1930, the principles governing contributions from the County Council were fully stated and a brief summary has appeared in subsequent Reports.

Contributions continue to be payable in respect of schemes mentioned in previous Reports, where the financial positions warrant them, but no new ones have been approved during the period under review.

A scheme proposed by the Leicester Corporation has already been mentioned, and during the year information was received of their intention to introduce a Bill in Parliament, the proposals in the first instance being to impound the head waters of the River Manifold, in Staffordshire, by constructing a dam across the valley to form a large reservoir, and to construct a large trunk main to the City of Leicester. The County Council being primarily interested as far as their own area was concerned, in water supplies, agriculture, roads, footpaths and amenities, decided to oppose the Bill, which was deposited in February, 1946. After consideration, intimation was later received that the Leicester Corporation had been unsuccessful in their petition.

WATER ACT, 1945.

This Act came into operation on the 1st October, 1945, and following upon the Rural Water Supplies and Sewerage Act, 1944, completed the process of giving legislative effect to Part I of the White Paper of 1944.

Part I of the Act gives the Minister of Health specific statutory responsibility for promoting the conservation and proper use of water resources and the provision of water supplies ; requires him to appoint a Central Advisory Water Committee to advise the Government on general issues, and empowers him to constitute a Joint Advisory Water Committee for any area if he is satisfied that this is necessary in order to secure more effective provision of water supplies for the area. This part of the Act also makes provision for obtaining records and information from persons abstracting water from any source (on which matter detailed regulations will be made by the Minister at a later date and will be laid before Parliament) and lays down certain requirements as to notices, inspection, records, etc., which must be complied with in future by persons proposing to sink wells or boreholes in search of water at a depth of more than fifty feet below the surface. The combined effect of Parts II to IV of the Act is to provide a simpler and more expeditious procedure, in place of previous procedure by private Bill, by which water undertakers can obtain all necessary powers to carry on their undertakings, to amalgamate or combine for joint action, to adjust their areas, to execute works, to give and receive supplies in bulk and to obtain land and water resources. The Minister's default powers enable him to transfer certain functions to the County Council where he is satisfied after inquiry that there has been a failure on the part of the Council of a County District or a Joint Water Board to discharge the duty imposed upon them by Section III of the Public Health Act, 1936.

Section 14 of the Act enables the Minister by provisional Order to declare any area to be one in which special measures for the conservation of water are necessary in the public interest; thereafter, the sinking, etc., of wells is controlled by a system of licences and certain special provisions designed to prevent waste and misuse come into force.

Section 27 of the Act confers on industrialists, farmers and other users of water for non-domestic purposes, the specific right to a supply on reasonable terms and conditions, subject to suitable safeguards for existing consumers.

Section 37 is of particular importance in relation to new housing development; it imposes a specific obligation on water undertakers to lay mains in advance of development, subject to the receipt of the prescribed guarantee and also, where applicable, of a deposit by way of security as provided in the Section; a deposit is not required where the prospective developer is a local Authority. Section 29 also affects new houses; in general, it requires the Local Authority to reject plans of new houses unless the public piped water supply is to be laid on to each house.

Section 36 (duty of statutory water undertakers to accept guarantees from Local Authorities) repeals and re-enacts with important modifications Section 5 of the Rural Water Supplies and Sewerage Act, 1944, and applies to all areas, whether urban or rural.

RURAL HOUSING.

Under the Housing (Rural Workers) Acts contributions were given by the County Council for the reconditioning of old houses in rural areas, and for the conversion into dwellings of buildings not previously used for that purpose. At their October, 1945, meeting, however, the Public Health Committee were informed of a communication from the Ministry of Health stating that the powers of Local Authorities to grant such assistance would be limited to applications received before the 30th September, 1945, and that it was not the Government's intention to introduce legislation to extend this date in the immediate future.

During the year, ten applications were considered, three of which were subsequently withdrawn and four not approved, grants being offered in the following instances :—

Parish		Amount	No. of Properties
Wall	 	±400	involved 8 Cottages
Alrewas	 line.	100	1 Cottage at Fradley
Blithfield	 	200	2 cottages at Admaston

Towards the end of 1944, a Staffordshire Rural Housing Advisory Committee was established, consisting of 13 representatives of the County Council and 2 from each of the Rural District Councils, and on the 20th March, 1945, a Technical Advisory Sub-Committee commenced its meetings, which have been continued periodically, proving particularly beneficial in assisting officers conducting surveys, etc.

At their June, 1945 meeting the Public Health Committee were informed of a communication from the Rural District Councils' Association to the Staffordshire Rural Housing Advisory Committee requesting them to consider as to the District Councils being asked to undertake on behalf of the County Council duties connected with the administration of the Housing (Rural Workers) Act, 1926, and that the Advisory Committee had passed it on to them for consideration. The Public Health Committee were informed that in certain counties the Rural District Councils permitted their officers, at a small fee paid by the County Council, to supervise, on behalf of the County Council, work being carried out, although the County Councils receive and consider applications for grant, and also decide on the amount of grant to be paid after the completion of the work. After consideration, approval was given in principle to there being such co-operation with the District Councils in Staffordshire as may be practicable, and that officers of the Rural District Councils' Association be consulted, a report to be submitted at a subsequent meeting.

HOUSING (FINANCIAL PROVISIONS) ACT, 1938.

The Stone Rural District Council had provided 10 agricultural cottages under the wartime emergency scheme, and Section 7 (2) of the Act provides that where the Minister of Health has undertaken to make increased contributions of $\pounds 12$ per house per annum for 40 years, the County Council are required to contribute $\pounds 3$ per house per annum for a like period. The matter was formally reported to the County Council during the period under review, and of course, agreed.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE

I have no general comments to make as far as Isolation Hospital accommodation in the County is concerned.

The following statistics relate to the notifiable infectious diseases amongst civilians during the calendar year, 1945. On reference to the tables at the end of the Report the numbers and death-rates for each Sanitary District will be found.

SMALLPOX.—No case of Smallpox was notified in 1945. The

last one recorded was in 1942, which was the first experienced in the County since 1930.

SCARLET FEVER.—There was a decrease in the incidence of this disease, 1,528 cases having been notified, compared with 1,616 in 1944, but the prevailing type was mild. In the Urban Districts there were 1,238 cases and in the Rural Districts 290, as against 1,296 and 320, respectively, in the previous year. The case rates per thousand of the population were :—Urban Districts, 2.14, Rural Districts 1.53 with a total County rate of 1.99, whilst that for England and Wales was 1.89. The corresponding rates for 1944, were 2.23, 1.67, 2.09 and 2.40, respectively.

Two deaths occurred in Urban Districts and none in the Rural Districts.

DIPHTHERIA.—There was a substantial decrease in the incidence of this disease, for 553 notifications were made, compared with 639 in the previous year, and again the prevailing type was more severe than scarlet fever. In the Urban Districts there were 470 cases, as against 552, and in the Rural Districts 83 compared with 87. The total case-rate was 0.72, whilst that for England and Wales was 0.46, as against 0.83 and 0.58, respectively, in the previous year.

Fourteen deaths occurred in the Urban and 2 in the Rural Districts, which yield death-rates of 0.02 and 0.01, respectively.

In 1944 there were 40 deaths from this disease.

For information regarding the diphtheria immunisation campaigns throughout the Administrative County reference should be made to the Reports of the local Medical Officers of Health, whose Councils are primarily responsible for the work. Much activity has taken place, however, and the County Council continue to give all possible assistance when their co-operation is required, viz., their Medical Staff undertake immunisation in the Schools and Welfare Centres, and the Health Visitors act as propagandists and obtain parental consents.

Facilities are provided in the County Laboratory for bacteriological investigations, and, in 1945, 23,367 specimens were dealt with, compared with 27,245 in the previous year. These included 52 virulence tests undertaken in special cases, and 1,021 tests for the identification of diphtheria-like organisms.

ENTERIC FEVER.—Seven notifications of enteric fever were made during the year, as compared with 8 in 1944. One (Typhoid) was in an Urban District and 6 (2 Typhoid; 4 Paratyphoid) in Rural Districts, compared with 6 and 2, respectively, during the previous year. The case rates for the Country as a whole, both for Typhoid and Paratyphoid, were 0.01 per thousand of the population in each instance, the Staffordshire rate for Paratyphoid being similar. Two deaths from this disease occurred, one each in the Urban and Rural Districts.

MEASLES.—During the period, 8,640 notifications were made, which indicates a marked increase for the corresponding figure for 1944 was 3,134. Six thousand seven hundred and ninety-three cases occurred in Urban and 1,847 in Rural Districts, compared with 2,394 and 740 in the previous year. The 1945 case-rates for the County and England and Wales were 11.24 and 11.67, as against 4.05 and 4.16 in 1944.

Twenty-three deaths occurred in the Urban Districts and 8 in the Rural, the death-rate in each instance being 0.04. There were 6 deaths in 1944.

WHOOPING COUGH.—There was a decrease in the number of notifications, 1,559 being made in 1945, as compared with 1,845 in 1944. In the Urban Districts there were 1,176 as against 1,469 whilst the corresponding figures for the Rural Districts were 383 and 376, respectively. The case-rate for the County was 2.03 and for England and Wales 1.64.

There were 13 deaths in the Urban Districts and 6 in the: Rural, the death-rates being 0.02 and 0.03, respectively. In 1944,, 22 deaths were due to this cause.

ENCEPHALITIS LETHARGICA.—One case in an Urban District: only was notified during 1945, but 7 deaths were reported, 5 in Urban and 2 in Rural Districts.

POLIOMYELITIS AND POLIOENCEPHALITIS.—In 1945, 28 cases: of Poliomyelitis were notified in Urban and 4 cases in Rural Districts.. There were also 5 notifications of Polioencephalitis in the Urban Districts. As regards deaths from these conditions, 4 occurred in Urban and 2 in Rural Districts.

During the previous year, 13 notifications, viz., Urban 10 and Rural 3, were made, and 3 deaths were recorded in the former.

DYSENTERY.—A large increase in the notifications of this disease was experienced, 218 being made as compared with 104 in 1944, and 54 in 1943. Nineteen of the 35 Sanitary Districts were affected, but in six instances, viz., Aldridge U.D., Bilston M.B., Coseley U.D., Stone U.D., Wednesbury M.B. and Stafford R.D., single cases only were notified. The remaining districts were affected as follows :—Biddulph U.D., 8; Brierley Hill U.D., 4; Brownhills U.D., 18; Cannock U.D., 7; Leek U.D., 2.; Newcastle M.B., 10; Stafford M.B., 35; Tipton M.B., 4; Cannock R.D., 6; Cheadle R.D., 83; Lichfield R.D., 7; Seisdon R.D., 8; and Stone R.D., 20. CEREBRO-SPINAL FEVER.—Thirty-one cases were notified during 1945, 27 in 14 of the 25 Urban, and 4 in 3 of the Rural Districts, which is the second lowest number recorded since 1939, when there were 28 cases, the following being the figures for the intervening years :—1940, 161; 1941, 128; 1942, 87; 1943, 50; and 1944, 26. The current case-rate for the County is 0.04 compared with 0.05 for England and Wales.

There were 13 deaths in 9 of the Urban Districts and one each in 2 of the Rural Districts, as against 8 and 4 deaths, respectively, in 1944.

The County Council have a scheme under which the services of Consultants are at the disposal of the General Practitioners, and special arrangements exist for the cerebro-spinal fluid to be sent to the County Bacteriological Laboratory in a portable incubator, because these organisms do not survive if sent through the post in the ordinary way. Twenty-four specimens of cerebro-spinal fluid from suspected cases were examined in the Laboratory during the year, together with 13 swabs, and typing was undertaken when possible.

The deaths from non-notifiable infectious diseases were as follows:--

DIARRHEA AND ENTERITIS.—Fifty-four deaths occurred in Urban Districts and 7 in Rural Districts, in children under 2 years of age, the death-rates being 4.8 and 2.1, respectively, per thousand live births. The deaths occurred in 20 of the Urban Districts and in 5 of the Rural Districts.

INFLUENZA.—In 1945 there were 60 deaths in Urban and 12 in Rural Districts, as compared with 67 and 16, respectively, in 1944.

The number of cases of Notifiable Infectious Diseases, with the deaths, in the Administrative County during 1945 are as follows :—

Disea			Noti	fications	Deaths		
Disea	ses		Urban	Rural	Urban	Rural	
Small-pox		 			-	_	
Scarlet Fever		 	1238	290	2		
Diphtheria		 	470	83	14 ,	2	
Enteric Fever		 	1	6	1	1	
Measles		 	6793	1847	23	8	
Whooping Cough		 	1176	383	13	6	
Puerperal Pyrexia		 	45	17	6	1	
Erysipelas		 	152	44		*	
Cerebro-Spinal Feve	Т	 	27	4	13	2	
Poliomyelitis		 	28	4	1	0	
Polioencephalitis		 	5		11 4	2	
Pneumonia			548	106	292	82	
Encephalitis Lethar		 	1		5	2	
Dysentery		 	93	125	*	*	

* Not classified in Registrar-General's Return.

VACCINATION

The ineffectiveness of the working of the Vaccination Acts is shown on examination of the Returns of the various Vaccination Officers for the year 1st January to 31st December, 1944, where it is seen that out of 12,130 children born during the year in whom vaccination was possible, only 33.0 per cent. were subsequently protected against smallpox.

SCABIES

The County Council co-operate with the District Councils in giving effect to the Order of 1941, and whilst the First Aid Posts and Cleansing Stations, set up for war-time purposes, were in operation, the use of the premises, with supplies of hot water, were made available without costs to the local rates. In 1945, however, the termination of the tenancies of the various premises took place, and, of necessity, by the end of June the facilities could no longer be afforded. During the first quarter of the year 11 of the 35 Local Councils took advantage of the provision, and 4 continued into the following quarter : in total 447 cleansing sessions were devoted to the work.

Apart from the foregoing, where other circumstances permit, the County Health Visitors assist at the cleansing sessions, and in-patient treatment, when necessary, is provided at the Public Assistance Institutions, the County Public Health Committee accepting financial responsibility. During 1945, 67 patients were admitted and treated at the Institutions.

TUBERCULOSIS

The treatment scheme is administered by the Staffordshire, Wolverhampton and Dudley Joint Board for Tuberculosis, whose Annual Report deals extensively with all aspects of the work.

It has been my custon each year to remind those who read this Report of the importance of preventive measures, which are the concern of the Public Health Service, and to emphasise the danger of overcrowded conditions in homes where members of the families are suffering from tuberculosis of the lungs. Adequate housing, of course, is the solution, for, obviously, the affected persons should have separate sleeping accommodation, and, although present day and future difficulties are appreciated, Local Authorities who are not already doing so, are urged to give the maximum priority to this unfortunate section of the community, for in this way they will be taking an active part in combating the disease. The result of the 1945 survey of the sleeping accommodation of pulmonary cases resident in the area of the Joint Board for Tuberculosis, who were being health visited, amply demonstrates the present unsatisfactory position, for of 3,293 patients only 50.2 per cent. had separate bedrooms, the remainder sharing rooms and beds with other members of the family, the latter, of course, being exposed to the risk of infection. It is hoped that as the housing schemes develop, each subsequent year will show an improvement of this percentage, for then we shall know that one grave danger to contacts is passing. It should be mentioned that 37.4 per cent. of the above-mentioned patients each shared a bed with one other person, and 5.3 per cent. with more than one person.

Given below are the 1945 statistics for the Administrative County.

			-	New	CASES		DEATHS.				
AGE PERIODS.			Pulmonary			Non- Pulmonary		Pulmonary		Non- Pulmonary	
	200		Μ.	F.	М.	F.	М.	F.	М.	F.	
0			23	_	4	_	2	-	3	_	
1— · · · · · · · · · · · · · · · · · · ·			$\frac{3}{16}$	4 9	21 21	13		1	18	8	
<u> </u>			8	15		145	4	2	4	7	
5			28	55	8	9)	at Dent	Peter 1	torrad	1907	
20— 25—	•••	• •	63 91	70 76	8	9	113	127	11	15	
			85	27	6	2)		19 and			
			65	17	7 8 8 9 6 3 3	-1	75	28	5	3	
55— 65 and upwards	::	11	40 13	11 5	3	11	9	5		4	
Totals			414	289	53	78	204	163	41	37	

Three hundred and sixty-seven persons died from pulmonary tuberculosis and 78 from other forms of tuberculosis, the deathrates being 0.48 and 0.10 per thousand of the population, respectively. The corresponding rates for 1944 were 0.45 and 0.09. In the general tables at the end of the Report the numbers and rates for each Sanitary District will be found.

The table which follows shows the death-rates in the Urban and Rural Districts of the County from 1914.

10 10 1010 1 1 1 1 1 1 1	De	eath Rate pe Popula	er 1,000 of thation	he		
Year	Phth	nisis	Other forms of Tuberculosis			
	Urban	Rural	Urban	Rural		
1914	0.89	0.54	0.31	0.20		
1915	0.94	0.67	0.34	0.29		
1916	1.01	0.80	0.40	0.29		
1917	1.01	0.74	0.34	0.31		
1918	1.03	0.88	0.31	0.28		
1919	0.83	0.61	0.22	0.30		
1920	0.75	0.56	0.30	0.21		
1921	0.80	0.53	0.23	0.21		
1922	0.80	0.55	0.24	0.17		
1923	0.75	0.58	0.25	0.22		
1924	0.73	0.58	0.22	0.20		
1925	0.83	0.49	0.22	0.14		
1926	0.74	0.50	0.22	0.11		
1927	0.73	0.44	0.21	0.22		
1928	0.64	0.48	0.14	0.13		
1929	0.76	0.54	0.15	0.12		
1930	0.72	0.54	0.15	0.13		
1931	0.78	0.52	0.17	0.13'		
1932	0.64	0.42	0.16	0.14		
1933	0.72	0.50	0.14	0.08		
1934	0.67	0.43	0.11	0.16		
1935	0.67	0.35	0.13	0.08		
1936	0.53	0.34	0.11	0.08		
1937	0.60	0.41	0.13	0.11		
1938	0.56	0.29	0.13	0.11		
1939	0.52	0.35	0.09	0.11		
1940	0.51	0.29	0.11	0.06		
1941	0.57	0.33	0.16	0.14		
1942	0.52	0.34	0.13	0.10		
1943	0.55	0.29	0.11	0.07		
1944	0.52	0.25	0.10	0.07		
1945	0.56	0.22	0.11	0.09		

NOTIFICATION.

The following are particulars of the primary notifications made from 1918 :---

1918	1919	1920	1921	1922	1923	1 924	1925	1926	1927	1928	1929	1930	1931
856	699	642	929	971	1029	974	1232	1400	1106	1194	1017	1021	1129
1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945
1074	1011	929	825	831	858	789	726	669	788	830	841	798	769

In addition to the 769 primary notifications in 1945, 105 cases, compared with 117 in the previous year, came to knowledge from other sources, 50 of which were transfers from other areas. It

was found that 45 unnotified cases had died, and in 10 further instances notification was made after death. These 55 deaths give a ratio of 1 in 8.1 of the total deaths; roughly 7 out of 8 deaths were of cases notified under the Regulations before decease.

The total notifications are classified in a preceding table and the incidence in the sexes and age groups should be specially observed.

REGISTERS OF DISTRICT MEDICAL OFFICERS OF HEALTH.

At the end of the year the following cases were included in these registers :—

TOTAL		PULMONARY		Non-Pulmonary			
Cases	М.	F.	Total	М.	F.	Total	
7833	2836	2529	5365	1294	1174	2468	

This indicates that there is one case of tuberculosis in every 98 persons, or 10.2 per thousand of the population. It also shows that, during the year, approximately one death occurred amongst 18 cases, which compares favourably with the expert opinion that for every death there are at least 10 persons suffering from the disease.

CANCER

In the following table, the deaths from Cancer during 1945, in age and sex groups, in the Urban and Rural Districts of the County, are shown :—

1	Url	ban District	ts	F	C			
Age Groups	Male	Female	Total	Male	Female	Total	Grand Total	
0				100-00	_	_	_	
1	1	1	2	-	1	1	3	
5	1	1	2		_	-	2	
15	32	48	80	8	18	26	106	
15	194	204	398	51	60	111	509	
35—	221	206	427	86	77	163	590	
Fotals	449	460	909	145	156	301	12!0	

As will be seen from the preceding table, this year there were

71

1,210 deaths from Cancer, which is the highest number so far recorded in the Administrative County : in 1944 there were 1,151. In each year since 1937 the figure has exceeded 1,000 and the tendency appears to be a rising one. During the period under review, this group of deaths accounted for 14.3 per cent. of the total civilian deaths, as compared with 14.5 per cent. last year when the total number of deaths was fewer by 553. As stated in my last Report, there is little variation from year to year in the group of deaths from this cause which occur in persons under the age of 45 years, the current number being 111, as against 96 and 100 in 1943 and 1944, respectively.

In considering the gradual rise in the mortality from Cancer, one must bear in mind that the general mortality from all causes under the age of 45 has, over a long period, become steadily less. This means, therefore, that in every population there exists an increasing number of persons of an age more susceptible to Cancer than are younger persons, the statement being proved by the fact that whilst in 1920 48.6 per cent. of the deaths from all causes were of persons under 45, the figure has gradually decreased in the subsequent years to 22.7 per cent. in 1945. As far as Staffordshire is concerned, in 1920 the deaths from Cancer amounted to 667, which in that year, was 7.7 per cent. of the total deaths.

The future in this respect cannot, of course, be anticipated, but it seems certain that until advances in science provide the means adequately to combat and control the disease, little improvement in the position can be expected.

GENERAL HEALTH PROPAGANDA

In view of the facilities provided by the Central Council for Health Education, it became apparent that the District Councils might consider instituting general health campaigns, as apart from those on sex education which for some years have been provided by the County Council, and have been commented upon in the Venereal Diseases section of the Annual Reports. In fact, towards the middle of 1945 it was learned that the Leek Urban District Council proposed having a 12 lecture course during the following winter, as a result of which the County Council considered their policy and decided the principle of financial participation on a 50—50 basis. It should be mentioned Leek Urban was the only District Council to undertake work of this nature during the period now under review.

VENEREAL DISEASES

Under the County Council scheme for the treatment of Venereal Diseases, agreements have been made with the North Staffordshire Royal Infirmary, Stoke-on-Trent; the Staffordshire General Infirmary, Stafford; the Royal Hospital, Wolverhampton; the Guest Hospital, Dudley; the Corbett Hospital, Amblecote; and the Walsall Corporation for the establishment of special clinics. A special arrangement also exists for the treatment of County cases at the Birmingham General Hospital, and there is an agreement with the Children's Hospital, Ladywood Road, Birmingham.

There is one whole-time Venereal Diseases Officer on the staff of the County Council who is responsible for the Clinics at Stafford and Stoke-on-Trent mentioned above. In addition, as a result of wartime staffing difficulties, by an arrangement between the County Council and the Stoke-on-Trent Corporation, he temporarily attends the Shelton Municipal Clinic.

The only treatment centres situated in the Administrative County are those at the Corbett Hospital, Amblecote, and the Staffordshire General Infirmary, Stafford, but the County Council are responsible for the one at the North Staffordshire Royal Infirmary, Stoke-on-Trent. The arrangements which exist at Centres in the areas of neighbouring Authorities have already been mentioned, and in a later table the attendances of County patients at the various hospitals are detailed. Again this year, the increase in the incidence of these diseases, and the presence of service cases at the Treatment Centres, has not been sufficient to demand any extension of pre-war facilities.

The General Practitioner Service at Lichfield, established at the suggestion of the Ministry of Health in 1942, is still in existence, and during 1945 one new patient was dealt with in this way. Since the facility was provided four patients only have taken advantage of it, and presumably those suffering from the disease find it more desirable from their point of view to travel some distance to attend the Treatment Centres say at Walsall and Birmingham.

Propaganda campaigns having justified themselves, the County Council again allocated £400 for the purpose, and the Central Council for Health Education arranged lecture courses in the following districts :—Aldridge U.D. (Rushall), Amblecote U.D., Coseley U.D., Darlaston U.D., Rugeley U.D., Sedgley U.D., Stafford M.B. (Youth Club), Stone U.D., Uttoxeter U.D., Wednesfield U.D., Cheadle R.D. (Cheadle), Stafford R.D. (Gnosall), Stone R.D. (Eccleshall), Tutbury R.D. (Tutbury).

In addition, a "Brains Trust" session was held at Willenhall, there were film shows at factories in Tipton and a single lecture to a Parents-Teachers Association at the Westlands, Newcastle. It was also intended to have courses in Kidsgrove U.D. (Harriseahead) and Leek R.D. (Endon) but the necessary arrangements could not be made.

With the exception of Tutbury, where, because of lack of interest, probably due to local misunderstanding, the course had to be abandoned, success was attained and the value of the work is now definitely established.

In my Report for 1943 I briefly explained the workings of Regulation 33B., which had been made towards the end of the previous year to give compulsory powers, in certain instances, to obtain attendance and treatment at the Venereal Diseases Centres. It was then mentioned that a person suffering from the disease could make a declaration on a prescribed form as to whom he or she considered was responsible for the condition, the information being passed on to the Medical Officer of Health of the County or County Borough where the contact resides. The compulsory powers can only be exercised where it is apparent from these forms that the same person is suspected by two or more patients to be the source of their infection, but where single declarations only are received the persons named therein are approached unofficially in an endeavour to obtain attendance at the Treatment Centres. These approaches are made to female contacts by the Supervisors of Midwives and Health Visitors, the County Sanitary Inspector dealing similarly with men.

During 1945, 57 contacts, all females, two of whom were transfers, were brought to notice, and, with the exception of three cases, single forms only were received. Two of these three women only could be traced, and one voluntarily accepted examination and treatment. The other first attended a Treatment Centre in this way, but later defaulted and only resumed after a statutory • requirement had been served on her.

In the remaining 54 instances, where single forms only were received, the Supervisors endeavoured to make unofficial approach with the following results :—

Already attending Treatment Centres			4
Attended as a result of the interview			16
Promised to attend but failed to do so			12
Examination refused	••		4
Service case referred to appropriate Auth	nority		1
Left for area of another Local Authority :			
transferred		•	1
Located but could not be interviewed			1
No trace			15
			-

During the year, 1,408 Staffordshire patients attended for treatment for the first time, compared with 1,237 in 1944, and the following detailed table indicates where it was obtained. The attendances shown in the appropriate column, however, relate to all patients and include visits by those referred for treatment in

previous years. It will be seen that in 1945, 867 of the persons who attended were found not to be infected, and the corresponding figure in the previous year was 791. The actual cases in 1944 and 1945 were 446 and 541, respectively.

TREATMENT CENTRE	Syphilis	Soft chancre	Gonorrhœa	Non-Venereal	Total New Cases	Attendances (all patients)
Birmingham General Hospital Burton-on-Trent General Infirmary Crewe County Clinic Derby Royal Infirmary Dudley Guest Hospital Salford Stafford (Staffordshire General Infirmary) Stoke-on-Trent (North Staffordshire	$ \begin{array}{r} 27 \\ 2 \\ \hline 12 \\ 15 \\ \hline 11 \end{array} $		$ \begin{array}{r} 46 \\ 10 \\ 2 \\ 5 \\ 41 \\ \overline{15} \end{array} $	$ 151 \\ 8 \\ 2 \\ 9 \\ 104 \\ 1 \\ 49 $	$224 \\ 20 \\ 4 \\ 26 \\ 160 \\ 1 \\ 75$	2811 326 194 270 3039 2 912
Royal Infirmary) Stoke-on-Trent (Municipal Clinic, Shelton) Stourbridge (Corbett Hospital) Walsall (Manor Hospital) Wolverhampton Royal Hospital	44 9 11 13 42		50 18 18 56 94	116 55 23 120 229	210 82 52 189 365	€355 661 885 1720 5957
Totals	186		355	867	1408	23132

For comparative purposes the totals of the cases included in the foregoing table for the last eleven years have been extracted and are given below. It will be seen that as far as Staffordshire is concerned there was a downward tendency in the total patients suffering from the diseases until 1941, when the numbers began to rise again, and that the 1945 figures are the highest during the period. An interesting aspect of the table is the distinct rise which commenced in 1942 of the number of persons who attended the Treatment Centres, presumably after having been exposed to the risk of infection, but were found not to be suffering from one of the diseases. It can be assumed from this that the various educational and propaganda campaigns are having their effect.

	Year	Syphilis	Soft Chancre	Gonorrhœa	Total Cases	Non-Venereal
-	1935	 166	4	322	492	295
	1936	 137	6	294	437	341
	1937	 116	5	320	441	326
	1938	 133	3	302	438	344
	1939	 116	5	283	404	310
	1940	 126	1 .	244	371	348
	1941	 111	i	267	379	359
	1942	 134	2	266	402	512
	1943	 163	2	271	436	783
	1944	 171	2	273	446	791
	1945	 186		355	541	867

Free samples of Salvarson or its substitutes are issued to General Practitioners, who comply with the necessary requirements, for the treatment of Staffordshire cases in their practices. At the end of 1945, the names of 33 doctors appeared on the approved list, five of whom took advantage of the provision during the year.

The County Council have arrangements for the admission of patients from the Administrative County to Cleveland House, Wolverhampton, an institution for the reception of expectant mothers suffering from venereal disease. In 1945 ten such patients were treated, six of whom were admitted during the year.

Unfortunately, owing to a decreased number of patients and lack of staff, it was found necessary temporarily to close the home from the 19th December, 1945, and it was still not available at the end of the year. Although the cases are few and far between, this home served an extremely useful purpose, being the only one of its kind in a wide area, and it is hoped that later on it will be possible to re-open it.

W. D. CARRUTHERS,

County Medical Officer of Health.

June, 1947.

TABLES

Table showing Population, Number of Persons per acre, Birth and Death-rates as well as the Death-rates at all ages and among Children under 1 year, and the Death-rates from Zymotic Diseases, Tuberculosis, Diseases of the Respiratory Organs, &c.

	.S.	airu	tnl dtriff.	Fions	0.56	1	61.0	0-30	0.23	0.30	0.21	0.40	0+-0	0-28	0-23	0.33	0-28	
		ų	niff suuse	Prem	91.0	1	0-29	0.36	0.23	0.34	0.24	20-0	0-25	1	0-34	11-0	0-13	-
u	-		altin	Neph	0-12	1.41	61.0	93.0	65.0	0.25	9.13	0.16	01.0	0.02	0.40	11.0	0-31	
Population		OLA	r Respirat	Disea	0.12	0.70	61.0	0.36	0.14	9.15	0-13	20.0	0-15	0.14	21.0	0.33	11.0	
0			sinom	Eneu	0.40	1	0.29	69-0	9-25	69-0	0.50	0-46	68-0	0-43	0.34	0.22	0.50	
Per 1,000			sitido	Bron	0.56	3.52	0.58	96.0	61-1	63.0	0.42	0.92	0.64	0.85	0.40	0.88	0.96	
Per			19	Cane	1.49	92-1	91-1	1.38	1-53	66-0	1.45	1.75	1-44	2.20	2.63	1.54	1-64	
		3	renlosis sicolosis		0.08	0.35	01.0	0.13	11.0	Ŀ	11.0	0.13	01.0	9-14	1	0.11	0-14	
	U		to sizolosis of tratory Sy		0-64	0.70	0.39	0.92	0.63	0.34	0.50	9.49	18 ()	0.28	0.11	0.44	0.56	
		Per 1,000	Births er rhoea	Diari Diari	1	1	T-4	10.8	1.2	7.8	5 2	8.0	2.4	3.5	3.7	5.7	2-5	
ality	Comm.	uo	theria	Diph		1	I	0.03	60-0	1	0.03	0.03	1	i	90.0		1	
Zymotic Mortality		1,000 of Population	th oping	Coug		1	1	0.03	1	0.05	1	0.07	1	20.0		0.11	1	
motic		of Po	let Fever	Scarl		1	01.0	1	1	1		1	1	1		l		
Z	3	1,000	89[8	Meas	0.04	1		0.13	0.05	1	11.0	01.0	0.05	1	I	1	0.02	
-		Per	biod and biodyt srs		1	1	1	1	1	1		1	L		0.06	1	1	
00	0'1	19q	tone year slity in ch	əpun	49	24	38	78	34	84	38	47	60	56	52	29	37	
			e death-ra		1.6	18.3	7.7	9.11	12.1	0.01	6.7	11.0	10.5	12.1	13-3	9.01	11-3	
	1 GL	q 94 10iti	births, Ra	000'I -III4S	0.48	1	0.58	0.59	0.65	6	0.45				40	0-44		
	1	tolta	Birth-rate	1,000 1,000	22.1	14.4	20.6 0.5	18.2	7-5 19-3 0-6	18-9 0-4	4-7 20-1 0-4	20.5 0.26	20.7 0.64	20.2 0.64	15.3 0	19-3 0-44	18.5 0.61	
		suo	ber of pers	Num N	2.7	4.3	1.6	16.2	7.5	3.2	4-7	9.2	13.1	3.4	4-1	2.5	7.2	
	ation	ages	Estimated 1945		24,830	2,839	10,310	30,330	44,410	20,300	38,060	30,330	20,200	14,080	17,480	9,082	63,850	
	Population	sage lin un	Census 1931 of areas as constituted	after changes in Boundary	14,446	3,099	8,990	31,4321	44,671	18,368	35,300	25,137	20,053	14,940	19,442	8,574	54,739	And and a state of the state of
					:	:	:	:	:	:	:	:	:	:	:	:	:	
					:	:	:	:	:	:	:	:	:	:	:	:	:	
			RICT		:	:	:			:	:	:	:	:	:	:	:	
			DISTRICT					-	IIII .							•		
					Aldridge	Amblecote	Biddulph	Bilston	Brierley Hill	Brownhills	Cannock	Coseley	Darlaston	Kidsgrove	Leek	Lichfield	Newcastle	

UR.BAN.

Infantile Diseases

	6	Accidents Other Violent Causes All other Causes	6 6 29	- 1 8	2 - 8	2 2 53	4 18 90	5 9 21	3 8 53	5 7 49	- 4 37	- 5 21	- 3 13	1 1 12	7 17 59
	-	Suicide Road Traffic	4	1	-	1	21	-	-	00			3	-	10
		tions, Birth Injuries Infantile Diseases	14	1	¢1	6	10	9	8		80	4	4	3	8
	-8	Premature Birth Congenital Malform	4	1	60	11	10	1~	6	01	ŝ	1	9	-	8
	-	Causes	51	1	1	61	61	01	61	1	54		-	1	9
	-	Puerperal and Post-abortive Sepais Other Maternal	1	1	1	1	1	1	1	1	T	T		1	01
	-	Zephritis	3	4	61	Ξ	13	10	10	10	¢1		5	-	20
		Diseases Other Digestive	8	1	1	2	13	6	12	8	63	9	3	c1	2
		Appendicitis	-	T	1	1	61	1	4	3	1	1		1	4
		Diarrhova under	1	1		9	-	03	424	ŝ	-	-	-	-	3
		Duodenum Ulcer of Stomach or	5	1	1	4	5	3	1	1	4	-	3	1	8
		Diseases Other Respiratory	3	01	61	11	9	3	i0	61	3	61	33	0	5
year.	-	Pneumonia	10		6 3	21	311	314	619	314	3 18	6	9	67	32
		Bronchitts	14	10		29	53	18		50	13	12	1	00	61
une		Other Diseases of	9	33	-	w	15	61	31	S	6	4	61	-	17
tio		Heart Disease	34	. 6	20	63	102	50	64	19	29	40	95	26	206
aurin		Vascular Lesions	16	5	10	17	58	18	31	39	21	18	20	10	70
5	-	Diabetes Intra-Cranial	61	1	1	8	10	prei	5	-	3	4	io	61	5
E E		Of all other Sites	22	0	00	20	38	13	23	30	11	22	31	11	54
-	Gr	Of Breast	4	1	63	00	8	3	-	3	4	3	1	-	15
BAN	Cancer	Duodenum Duodenum	5	-	61	10	16	4	13	12	00	4	1	1	29
70 62		Of Buccal Cavity of Buccal Cavity	4	-	1	4	9	1	15	9	9	63	5	C-1	5
n annagon		Encephalitis	1	1	1	1		1	1	I	1	-		1	1
B		Acute Polioencephalitis	1	1	1	-	-	1	1	1	1			1	1
TM	-	Measies Manual atte				4	5	10	1 4	3 3	1	3	1	_	-
Iar	_	Influenza	9 1	0	10	=	3		1	03	-		T	-	3 3
in a c	-	Tuberculosis Syphilitic Diseases	¢4		-	4	ŝ	1	4	4	61	C3	T	-	6
ŝ	-	Other Forms of Other Forms of	16	61	4	28	28	~	19	15	18	4	C1	4	36
	-	Tuberculosis of	-	1	T	-	4.	1	-	-	1	1	-	T	T
	-	Diphtheria		1	1	-	i.	-		01	İ	-	1	-	Í
	-	Scarlet Fever		1	-	5	5			-	-	-		1	-
		Cerebro-Spinal Feve			-	1		1	-	-		-	-		-
	1	Typhoid and Typhoid and	-	-	00		0	1	6	6	10	5		0	
	L	Deaths under 1 year	7 27	52 1	3 62	2 43	8 29	3 32	8 29	35 29	3 25	1 16	33 14	96	0 4
	595	Deaths from all cau	2 227	us L	6 7	8 352	9 538	0 203	17 368	8 335	13 213	171 9	7 233	4 9	1181 39 720 44
		Still Births	548 12	41		553 18	856 29	383 10	765 1'	623 1	419 1:	284	268	175	31 3
		Live Births		4	212		-	38	7.		. 41	. 28	. 26		118
			:		:	:	:	•	•	:	•	•		•	•
		The second second					=	-							
		12.2 2		ote	ч.	•	Hi	ills			. uc	ve			tle
		DISTRICT	Aldridge	Amblecote	Biddulph	Bilston	Brierley Hill	Brownhills	Cannock	Coseley	Darlaston	Kidsgrove	4	Lichfield	Newcastle
		TST	Idri	mb	pp	list	riei	LON	IUE	ose.	arl	ids	Leek	ich	ew

Deaths occurring during the year 1945 classified according to Diseases and Localities, together with Births occurring during the year.

80	Per 1,000 of Population	ries,	Pneumonia Cancer Tubercuitis Tubermonia	0.07 1.85 1.06 0.40 0.04 0.20 0.09 0.35	0.13 1.78 0.13 0.64 - 0.51 0.25 .	0.29 1.29 1.00 0.48 0.10 0.48 0.19 0.24	0.06 1.25 0.68 0.48 0.06 0.21 0.27 0.21	0.14 1.50 0.96 0.27 - 0.27 0.41 0.68	0.08 1.84 0.67 0.67 0.17 0.33 0.33 0.17	0.30 1.33 9.59 9.59 0.15	0-17 1-42 1.08 0.56 0.06 0.36 0.22 0.28	- 1.66 0.60 0.45 - 0.30 0.45 -	- 1.89 0.71 0.59 0.12 0.12 0.09 0.25	$0.13 \ 0.97 \ 0.65 \ 0.39 \ - \ 0.19 \ 0 \ 52 \ 0.19$	0.07 1.59 1.28 0.89 0.14 0.21 0.21 0.21	0.11 1.57 0.86 0.50 0.12 0.24 0.21 0.28		
		_	Tuberculosis of	1-2 0.48	- 0.38	- 0.38	3-1 0-42	- 0.27	9-3 0-42	8-1 0-44	6.7 0.86	7.1 0.15	6-0 0-65	1.5 0.58	1.9 0.82	4-8 0-56	7.8 -	4.5
	lity	-	Diphtherla	0-04	0-13	1			1	1	90-0	1	1	0.06 1	-	0.02	0-02	0.02
	ic Morta.	Populati	Whooping Cough	- 0.02	1	1	1		1	- 0.15	- 0.03		90.0 -	- 0.13	1	0 0.02	0 0.02	10-0
	Zymot	1,000 of	Scarlet Fever	0.02	- 0.13	0.05 -	0-03 -			1	- 90.0	-	1	- 90-0	0.04 -	0-04 0-00	0-02 0-00	0-02 0-00
ped		Per 1	Typhoid and Paratyphoid Fevers	0	1	0		1	1	1	1	1	1	1		0.00	0.00	0 00-0
continued		0.1 19	under one year p	40	48	51	47	70	60	32	58	29	37	66	54	48	54	43
Ĩ		19Q 9	Crude desth-rat	5 10.2	- 10-8	3 11.4	1.0.1	- 11.6	2 12.8	9 10-5	3 11-0	5 14.2	11.5	5 9.2	2 11 -5	11.0	3 13-5	3 12.3
UKBAN		Aumber of persons Aumber of Population Autor		1 0.55	-0	8 0-43	18-9 0-54	4	0 0.92	3 0.59	7 0.56	2 0.15	20.9 0.62	5 0-65	9 0.32	5 0-52	1 0.58	2 0.53
5	-	Population Population Population at all ages at all ages ber at all ages at all ages ber at all ages at all ages at all ages ber at all ages at all ages ber at all ages at all ages ber at all ages at all ages ber at		1.61 6.11	2.7 21.0	5.4 15.8	6.6 18-	4.5 19.4	4.4 18.0	2.7 18.3	6.6 20.7	2.0 21.2	5-9 20-	6.1 22.5	10.0 20.9	5.8 19.5	1.61 -	- 19-2
	ation		1	45,480	7,864	20,970	33,610 6	7,319	11,970	6,758 2	35,950 10	6,618 2	32,200 15	15,450 6	28,220 10	578,510 5	1	٢
	Donn	atall	Census 1931 of areas as constituted after changes in Boundary	41,235	7,137	19,262	30,851	6,399	11,711	5,967	35,814	6,234	31,531	9,106	26,421	530,648	-	1
					:	: :	:		: :	: :		:	:	:	:	s	cngland	resident 0-50,000
			DISTRICT.	Rowley Regis	Rugeley	Sedgley	Stafford	Stone	Tamworth	Tettenhall	Tipton	Uttoxeter	Wednesbury	Wednesfield	Willenhall	Totals and Averages	126 large towns in England	148 smaller towns, resident Population 25,000-50,000

URBAN-continued

1		a VII other Causes	3	14	34	58	14	27	2	38	11	53	26	44	5	-
			4	1	1	10	-	-	-	13 5	6 1	80	6 2	4 1	1 787	8
	80	Accidents Other Violent Cause	-	01	61	00	1	61	T	3 1	1	-	1		4 141	
		Road Traffic					-		-		1				54	
		Sulcide	61	1_	61	61	67	61	-	01	-	00	1	C1	45	
		Concentral Mallorn tions, Birth Injurie Infantile Discases	16	61	ŝ	-	ŝ	67	1	10	1	œ	33	9	163	
		Premature Birth	4	4		6	3	4	1	80	3	00	80	9	122	
		Other Maternal Causes	1	-	1	-	1	1	-	-	64	1	1	-	26	
	s	Puerperal and Post-abortive Sepsi	1	-	T	1	-	1	1	T	1	Г	T	1	9	
		Nephritis	6	1	10	5	63	+	1	13	01	4	3	0	139	
		Diseases Diseases	6	3	4	10	01	4	C1	9	63	6	4	00	139 1	
		Appendicitis	00	1	-	63	-	1	1	1		01			25 1	
		5 Years	-	1	T	61	T	01	T	n,	-	4	4	-	542	
	-	Duodenum Diarrhora under	3	1		04	67	4	01	4	1	3	1	~	55	
	T	Diseases	67	T	67	01	-	01	1	61	-	4	T	4	70	
		Other Respiratory	18	1	8		01	8	-		3		9			
		rinomusuT	18	ŝ	10	16	64		4	20		61 8		25	295	
		Bronchitls	48	1	21	23	5	80	4	39	4	23	10	36	499	
		Other Diseases of Circulatory System	4	5	3	16	-	31	1	9	-	10	-	14	164	
p		Heart Disease	133	20	52	95	15	27	25	11	32	82	31	51	616 1436 164 499 292	
continued		Intra-Cranial Vascular Lestons	45	00	34	40	00	16	~	44	12	40	5	27	161	
Iti		Diabetes	61		61	-	61	01	1	3	C1	4	61	9	64 6	
COL	1	Of all other Sites	46	10	19	21	9	15	1	28	00	40	12	32	530	
	-	Of Breast	10	67	T	1	T	-	-	10		3	1	3	92 5	
BAN	Cancer	Duodenum Duodenum	17	1	.9	6	4	w	1	13	I	11	1	~	88	
	-	Uterus (F)											-			
H I	1	Of Buccal Cavity	Ξ	61	C1	ŝ	-	1	1	s	1	1	1	3	66	
		Encephalitis	1	1	1	1	T	1	T	T	1	T	-	1	o.	
	sj	Acute Infectious		1	1	1	1	T	1	1	1	-	1		-	
		Measles Acute Poliomyelitis		-	-	-	-	-	-	5	-		-	-	60	
		szuenuu	3		01	in	53	57	-	01	10	10	1	-	60 23	
		Syphilitie Diseases	00	-	-	3	1		-	67			1	1		
		Tuberculosis	00		9	61	-		101	9	+	-	5	1	61 21	-
	£ -	Other Forms of	22	6	-00	14	61	cu	3	31	-	-	6	0	1	
		Tuberculosis of			-	-				1000		- 21	-	23	13 14 325	
	1	Diphtheria Whooping Cough	1 2	-	-				-	1 2	-	57	2 1		3 14	-
		Scarlet Fever		-	-	+		-	1	1	-	1	1		50	-
	II.	Cerebro-Spinal Feve		T	1	-	T	1	1	3	1	1	1	1	13	
		Paratyphoid Fevers	1	1	1	1	1	1	Ì		1	1	i	1	-	1
	-	Typhoid and Typhoid and	35	8	17	30	10	13	4	43	-4-	25	23	32	46	
			462	85	239	341	85	153	71	394	94	371	142	324	100	-
	898	Deaths from all caus	25 4	1	9 2	18 3		11 1	4	20 3	-	20 3	10 1	9 3	9 63	-
		Still Births	1000	1		_	1	_							29	-
		Live Births	868	165	331	635	142	215	124	745	140	672	347	590	11282 299 6348 546	
			:	:	:	•••	:	b	I	:		ury	pp		:	
		RICT	N.S.	ey.	Ň	p		ortl	hal	-	eter	esbt	sche	hal	als	
		DISTRICT	Regis	Rugeley	Sedgley	Stafford	Stone	Tamworth	Tettenhall	Tipton	Uttoxeter	Wednesbury	Wednesfield	Willenhall.	Totals	
		H	Ro	Ru	Se	Sta	Sto	Ta	Te	Til	Ut	W	We	Wi		1

URBAN-continued

	1			sresid of		10	3	0	6	6	10	0	0	10	-	6	
				tisM inti n1 driff		0.45	0.13	0.40	0-49	0.19	0-25	0-20	0.30	0.15	0-11	0-29	
			ų	ture Birt	Premat	0.18	0.06	0.07	0.24	90.0	0.25	0.14	0.36	0.38	0.43	0.20	
	tion			elt	Nephri	0.05	0.39	0.27	0.12	0.50	0.20	0.27	0.50	0.54	0.43	0.28	
1	Population	A	1.10	Respirate se	Disease Disease	0-14	0.13	0.20	60.0	0.31	0.15	0.20	0.18	1	11.0	0.15	
	JO			sino	Theum	0.73	0.26	0.13	0.40	0-44	99-0	0.14	0.42	0.76	0.43	0-43	
	er 1,000			stitu	Bronel	0.73	0.62	0.20	0.52	0.56	11.0	0.14	0.36	1-07	0-32	0.54	
	Per				Cancer	1-59	1.78	1.94	1-22	1-94	1-32	1.70	1.55	1.22	16.1	1.58	
			-	Forms of	Tubere Other	0.18	0.06	20.0	0.12	0.13	1.05	0.07	0.06	1	11-0	60.0	
		tuə		to sisolu: (S vrots		0-36	0.13	0.20	0.21	0.25	0.36	0.34	90.0	0.15	0-11	0-22	
	-	Per	1,000	riv	Z years Diarrh	4.8			1.6	3.5	6.1	1		3.9	1	2.1	
-	lity	-			Diphth	1	1	1		1	0.05	0.07	-1	1	1	0.01	
-	Morta	marke	VIO WITTL	Sup	Congh Whoop	60-0	1	1	90-0	1	0-05	1	90-0	1	1	0-03	
-	Zymotic Mortality	of Dow	IO T IO	1	Scarlet	1	1	1	1	1		1	1	1	1	1	
TT	ZSJ	1 000 of Donulation	1,000	8	Measle	0.05	90.0	1	60-0	90.0	1	20.0	1		1	0.04	
KUKA		Daw	Lei	prodq	Fevers Paraty Typhoi	1	1	0.07	1	1	1	1	1	1	1	10-01	
	001	0'11	əd	red live l	under o	67	19	44	48	28	61	22	50	39	38	42	
	-	uo	111	death-ra	1'000 0	12.3	10.4	12.0	10.01	12.4	19.5	10.9	9.4	14.8	13.8	11-3	
	-	on per	91	rths, Ra	0 000'I	0.54	0.52	6.60	0.83	18.0	0.56	0-41	0.54	0.61	1.06		
		uc	11	star-dri	0 000'I	18.9 0-54	2.0 17.1 0.52	4.9 16.9 6.60	19-0 0-83	17-8 0-81	16.6 0.56	18.2 0.41	13-1 0-54	19.5 0.61	19-7	3.1 17.7 0.64	
				in acres	Person Mean	2.6	2.0	4.9	2.6	2.5	2.1	5.5	3.7	2.4	6-0	3.1	
		ation ages		Estimated	1945	22,040	30,890	14,920	32,710	15,980	19,640	14,690	16,790	13,080	9,400	190,140	
		Population at all ages		Census 1931 of areas as	constituted after changes in Boundary	20,792	28,102	14,435	31,551	16,872	13,850	12,895	11,945	10,356	8,906	169,704	and all all
				9		:	:	:	:	:	:	:	:	:	:		1
				.E		:	:	:	:	:	:	:	:	:	:	tals and Averages	
				DISTRICT.		×			T	tle					er	A bu	
				D		Cannock	Cheadle	Leek .	Lichfield	Newcastle	Seisdon	Stafford	Stone .	Tutbury	Uttoxeter	- talsa	1

RURAL

82

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1	All other Causes	36	38	15	30	23	33	19	19	19-	22	254
	Other Violent Causes	11	10	4	6	5	4	10	4	40	16	10 2
-	Road Traffic Accidents	10	9	T	u.	-	-	¢1	3	4	64	26 110
-	Suicide	64	-	1	-1	1	-	-	1	T	-	00
1	Congenital Malforma tions, Birth Injuries, Infantile Diseases	10	4	9	16	3	ŝ	3	io	61	1	55
-	Premature Birth	4	61	-	00	-	10	61	9	2	4	38
19	Other Maternal Causes	-	1	1	C1	-	1	-	1	1	12	1
-	Puerperal and Post-abortive Sepais	T	1	1	T	1	1	1	T	1	1	-
10	Nephritis	-	12	4	4	00	-	4	10	5	4	53
1	Other Digestive Diseases	2	9	4	1	9	9	3	ŝ	01	3	49
-	Appendicitis	-	-	+		1		-	-	67	1	6
	2 years Diarrhoea under	61	T	T	-	-	01	1	1	1	1	1
R	Duodenum Ulcer of Stomach or	4	4	-	1	I	64	1	1	T	-	19
-	Discases	3	4	00	00	5	3	0	3	1	-	28
-	Pneumonia Other Respiratory	16	8	10	13	1	3	67	5	0	4	101
1	Bronchitis	16 1	19	3	171	6	141	61	9	141	8	1038
-	Circulatory System	5	8	00	10	1	9	in	61	10	67	72 10
-	Other Diseases of	-	92	00		D	10	D	9 1	9 1	-	
-	Heart Disease	61		68	98	57	4	47	3 29	39	31	567
-	Intra-Cranial Vascular Lesions	28	30	23	33	10	22	24	16	18	11	226
-	Diabetes	4	9	C4	4	53	1	3	1	1	5	26
16	Of all other Sites	22	28	18	25	18	18	16	15	9	10	176
er	Of Breast	2	-	3	6 6	10	61	-	6 4	0	57	34
Cancer	Duodenum Duodenum	5	18	9		9	00	4	9	33	s.	64
	Of Buccal Cavity of Buccal Cavity	1	8	2	3	C1	3	-	1	2	-	27
	Acute Infectious Encephalitis	T	61	1		1	1	1	1	1	1	5
s	and Polioencephalit	1	T	-	T	1	1	1	1	1	1	61
-	Measles Acute Poliomyelitis	-	61	1	3	-	T	-	1	-	1	00
-	Eznenza	61	01	10	T	T	-	1	3	-	61	12
	Syphilitic Diseases	1	1	1	-	1	-	1	61	Ì	1	9
	Tuberculosis	4	C1	1	di.	61	-	1	-	1		17
	Tuberculosis of Respiratory System	80	4	00	1	4	1	w.	1	67	1	42
	Diphtheria	1	1	1	1	1	1	-	1	1	1	61
	Whooping Cough	61			61		1		-	1		6
	Scarlet Fever	1				1	-	1			-	
	Cerebro-Spinal Fevers	-	-	-						-		1 5
-	bas biodqvT	-	-		-	00	-	9	-	-	1	
1	Desths under I yes	28	10	11 6	7 30		6 20	_	11 2	4 10		1 14
Səs	Deaths from all cau	270	320	179	327	198	206	160	157	194	130	2141
an s	[Still Births	12	16	6	27	13	11	9	6	80	10	121 2141 141
1	Live Births	417	528	252	623	285	326	268	220	255	185	. 3359
	F	:	:	:	1	0	1	:	:	:	H	:
	TRIC	ok	le		eld	astl	u	rd		ury	tete	10
	DISTRICT	Cannock	Cheadle	ek	Lichfield	Newcastle	Seisdon	Stafford	Stone	Tutbury	Uttoxeter	Totals
		Ca	Ch	Leek	Li	N	Se	St	St	Tu	IJ	To

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Table showing the number of cases of certain Infectious Diseases notified in each sanitary area during the year ended 31st December, 1945, and the Attack-Rates per 1,000 of the population.

											URBAN	AN													
	Estir Popu	Estimated	Smallpox	xod	Typhoid	hoid	Para- Typhoid	 bid	Scarlet Fever		Whooping Cough		Diphtheria		Erysipelas		Measles		Pneumonia	1997	Puerperal Pyrexia			sitils	1015
DISTRICT	calcu ra	calculating rates	Cases	Rate	Cases	Cases Rate Cases Rate Cases Rate Cases Rate	ases	Rate 0	Cases		Cases	Rate C	ases	Cases Rate Cases Rate Cases Rate	ases		Cases Rate		CasesR ate		Cases Rate		Fever (Encept Cases	Lethar
Aldridge	24	24,830	1	1	1	1		1	58	2.31	66	3-99	ŝ	0.20	15	09-0	483 1	19-45	40	1-61	3	0.12	-	-	1
Amblecote	:	2,839	1	1	1	1	1	1	9	2.11	67	0.70	1	0-35	1		43 1	15.15	67	0-70	1	1	1	1	1
Biddulph	10	10,310	1	1	-1		1	1	20	6.79	23	2.23	3	0.29	2	0.68	71	68-9	25	2.42	3	0.29	3	· 1	1
Bilston	30	30,330	1	1	!	1			48	1.58	98	3.23	41	1.35	6	0-30	165	5.44	11	2.34	1	0.03	67	4	1
Brierley Hill	44	44,410	1	1	1	0.02	1	1	67	1.51	66	2.23	86	1.94	22	0.50	901 2	20-29	32	0.72	8	0.18	1	3	-
Brownhills	20	20,300		1	!		1	1	18	0-89	68	3.35	11	0.54	2	0-34	653 3	32-17	42	2.07	-	0.05	-	-	1
Cannock	38	38,060		1	1		1	1	48	1.26	28	0.74	19	0.50	14	0-37	749 1	19.68	11	0.29	67	0-05	1	4	1
Coseley	30	30,330		1	1		1		38	1.25	196	6.46	26	0.86	18	0-59	429 1	14-14	57	1.88	1	1	1		
Darlaston	20	20,200		1	1	1	1	1	34	1.68	52	2.57	21	1-04	1	0-05	127	6.29	18	68.0	-	0.05	1	-	1
Kidsgrove	14	14,080	1	1	1		1		29	2.06	14	66.0	1	0.07	9	0.43	40	2.84	01	0.71	61	0.14	1	1	
Leek	17,	17,480		ļ	1	1	1	1	17	26.0	36	2.06	4	0.23	1	1	60	3.43	10	0-29	1	1	63	1	
Lichfield	·6	9,082	4			1	1	1	6	66.0	26	2.86	1	1		1	149 1	16.41	-	0.11	1	0.77	-	1	
Newcastle	63,	63,850	1	1	1	1	1	1	171	2.68	24	0.38	13	0-20	4	0.06	210	3-29	27	0.42	1	0.02	4	-	

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Distruct Estimated Population and the set of the set and the s	sizias faltas	Crees Feebra	1	1	1	1	1	1	1	1	1	1	1	1
Image: Second contract in the second contract of the second contract in the second contract of the second contract in the second contrac		Cases	ŝ	1	67	-	1	1	61	61	1	-	-	1
Estimated Propulation Propertie Samalpox Typhoid Pare- Typhoid Scarlet Tever Whooping Diplutheria Eryspelas Measles Pneumonia Puerpectable Poppulation Propertie Poppulation Propertie Poppulation Propertie Typhoid Typhoid Tever Cough Fever Poppulation Propertie Properi Properind Proproid </td <td>Cases Cases</td> <td>Eever Cerebr</td> <td>1</td> <td>67</td> <td>-</td> <td>9</td> <td>1</td> <td>1</td> <td>1</td> <td>-</td> <td>1</td> <td>1</td> <td>1</td> <td>-</td>	Cases Cases	Eever Cerebr	1	67	-	9	1	1	1	-	1	1	1	-
Farmerial fraction Estimated Typhoid Smallpox Typhoid Typhoid Fever Fever Monoping Diphtherial Eryspetias Measles Pmerunonia Poer Warter Population Free Population Tates Typhoid Typhoid Fever Cough Diphtheria Eryspetias Measles Pmerunonia Poer V Regis - - - - - - 123 1564 9 1:14 9 1:14 0:13 314 756 9 0:20 2 V 20,970 - - - 123 1564 9 1:14 9 1:14 0:13 314 756 9 0:20 2 2 2 1:14 9 1:14 1 0:13 314 1:0 0:2 2 2 1:1 1 0:13 314 36 2 2 2 1:1 0:13 1:0 0:2 2 1 1 0:3 <td>eral</td> <td>Rate</td> <td>0.04</td> <td>0-25</td> <td>0.10</td> <td>0.15</td> <td>0-14</td> <td>1</td> <td>1</td> <td>1</td> <td>0-15</td> <td>0.03</td> <td>1</td> <td>0.01</td>	eral	Rate	0.04	0-25	0.10	0.15	0-14	1	1	1	0-15	0.03	1	0.01
Figurated Population Trates Smallpox Typhoid Typhoid Para- Fever Scarlet Cough Whooping Diphtheria Erysipelas Measles Preumonia Figuration Population Past for Trates Cases Rate Cases	Puerp	Cases	2	53	5	ŝ	-	1	1	1	-	-	١.	
Fightmated Smallpox Typhoid Para- Typhoid Scarlet Whooping Diphtheria Erysipelas Measules Vistrator Population 1955 for rates Papal Typhoid Typhoid Typhoid Fever Cough Erysipelas Measules Vistrator ediculating Cases Rate Cases <td< td=""><td>ionia</td><td>and the second sec</td><td>0.20</td><td>0.38</td><td>0.48</td><td>0.24</td><td>0.55</td><td>0-92</td><td>1.63</td><td>1.17</td><td>١</td><td>66-1</td><td>0-32</td><td>1.42</td></td<>	ionia	and the second sec	0.20	0.38	0.48	0.24	0.55	0-92	1.63	1.17	١	66-1	0-32	1.42
Figure Estimated rough Smallpox Typhoid Typhoid Fever Fever Nhooping Diphtheria Erysipelas Measles VSTRICT Population rates Population rates Cases Rate	Pneun	Cases	6	3	10	8	4	11						
Testimated Population Target Smallpox Typhoid Typhoid Para- Fever Scather Cough Diphtheria Erysipelas Measure Acases Vistrator Pepulation (rates) Page Typhoid Fever Cough Erysipelas Measure Acases Vistrator Cases Rate Cas	2 2	The second s	7.56	39-93	11-54	14.52	1.09	6.27	13 02	13.38	9 52	7.55	6.86	9.25
Figure Estimated Smallpox Typhoid Para- Scarlet Whoping Diphtheria Erysipelas ISTRICT Population Population Typhoid Typhoid Fever Cough Diphtheria Erysipelas Y series rates Rate Cases Rate Cases <td>Meas</td> <td>Cases</td> <td>344</td> <td></td> <td>242</td> <td></td> <td>8</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Meas	Cases	344		242		8							
Festimated Population Population Population Populating Smallpox Typhoid Typhoid Fever Fever Whooping rstrater Populating Populating Scarlet Number Scale Scarlet Whooping rstrater Populating Cases Rate Cases Rate Cases Rate Cases Rate Cases Rate Cases Rate Cough 9 114 9 114 9 114 9 114 9 114 9 114 9 114 9 114 9 114 9 114 9 114 9 114 9 114 9 114 115 11 9 114 11 11 9 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11	pelas	Rate	0-07	0.13	0.33	0.33	0-14	0.17	0.15	0.25	0.30	60-0	0.06	0.28
Festimated Population Population Population Populating Smallpox Typhoid Para- Typhoid Scarlet Fever Whooping rstrater Populating Cough Typhoid Fever Cough rates Populating Cases Rate Cases Rate Cases Rate Cases Rate Cases Rate Cases Rate Cough 9 114 9 114 9 114 9 114 9 114 9 114 9 128 Rate Cases Rate $\gamma \gamma $	Erysi	Cases	00	1	2	-		61	1				1	
Festimated Population Population Population Populating Smallpox Typhoid Para- Typhoid Scarlet Fever Whooping rstrater Populating Cough Typhoid Fever Cough rates Populating Cases Rate Cases Rate Cases Rate Cases Rate Cases Rate Cases Rate Cough 9 114 9 114 9 114 9 114 9 114 9 114 9 128 Rate Cases Rate $\gamma \gamma $	heria	Rate	1-39	1.14	0.86	0.15	2.19	1		1.50	0.45	1.18	1.42	0-36
Festimated Population Population Population Populating Smallpox Typhoid Para- Typhoid Scarlet Fever Whooping rstrater Populating Cough Typhoid Fever Cough rates Populating Cases Rate Cases Rate Cases Rate Cases Rate Cases Rate Cases Rate Cough 9 114 9 114 9 114 9 114 9 114 9 114 9 128 Rate Cases Rate $\gamma \gamma $	Dipht	Cases	63	6	18	ŝ	16	1						
Fertinated Population Smallpox Typhoid Para- Typhoid Scarlet Fever rstruct Population Scarlet Fever Scarlet rates rates Cases Rate Cases Rate Cases rates 45,480 72 158 rates 135,480 23 15.64 rates 20,970 29 1:38 r 33,610 20 29 1:38 r 20,970 29 1:38 r 20,970 29 1:38 r 23,610 29 20 r 33,610	ping		1.36	1.14	0.52	2.38	0.55	1-00	1.63	1.70	0.76	2.33	2-01	1-77
Fertinated Population Smallpox Typhoid Para- Typhoid Scarlet Fever rstruct Population Scarlet Fever Scarlet rates rates Cases Rate Cases Rate Cases rates 45,480 72 158 rates 135,480 23 15.64 rates 20,970 29 1:38 r 33,610 20 29 1:38 r 20,970 29 1:38 r 20,970 29 1:38 r 23,610 29 20 r 33,610	Whool	Cases	62	6	II	8)	4	12			ŝ			
Fight Estimated Population Population Population Population y Regis 45,480 calculating 7,864 y 7,864 y 7,864 y 7,864 y 7,864 y 7,864 y 20,970 orth 20,970 d 20,970 orth 20,970 d 33,610 orth 33,610 n 33,610 d 33,610 eden 35,950 n 35,950 eter 32,200 esfield 15,450 nhall 28,220	let er	Rate	1.58		1.38	2.20	1	2.51	0=74	3.64	1.81		0.97	3-01
Fight Estimated Population Population Population Population y Regis 45,480 calculating 7,864 y 7,864 y 7,864 y 7,864 y 7,864 y 7,864 y 20,970 orth 20,970 d 20,970 orth 20,970 d 33,610 orth 33,610 n 33,610 d 33,610 eden 35,950 n 35,950 eter 32,200 esfield 15,450 nhall 28,220	Scar	Cases	72		29	74	Ì	30	w	131	12	49	15	83
Fight Estimated Population Population 945 for 1945 for 95 mated 1945 for 95 mated 1945 for 95 mated 1945 for 95 mated 1945 for 97 mated 7,864 97 mated 7,864 97 mated 7,864 97 mated 7,319 91 mated 11,970 91 mated 11,970 91 mated 6,758 92,950 6418 92,950 6418 92,200 6518 92,200 92,200 91 mated 15,450 10 mated 15,450	a- oid	Rate	1	1	1	1	1	1	1	1	1	1	1	1
Fight Estimated Population Population 945 for 1945 for 95 mated 1945 for 95 mated 1945 for 95 mated 1945 for 95 mated 1945 for 97 mated 7,864 97 mated 7,864 97 mated 7,864 97 mated 7,319 91 mated 11,970 91 mated 11,970 91 mated 6,758 92,950 6418 92,950 6418 92,200 6518 92,200 92,200 91 mated 15,450 10 mated 15,450	Par Typh	Cases	1	1	1	1	1	1	1	1	1	1	1	
Fight Estimated Population Population 945 for 1945 for 95 mated 1945 for 95 mated 1945 for 95 mated 1945 for 95 mated 1945 for 97 mated 7,864 97 mated 7,864 97 mated 7,864 97 mated 7,319 91 mated 11,970 91 mated 11,970 91 mated 6,758 92,950 6418 92,950 6418 92,200 6518 92,200 92,200 91 mated 15,450 10 mated 15,450	hoid	Rate	1		1	1		1	i	1	۱	1		
Fight Estimated Population Population 945 for 1945 for 95 mated 1945 for 95 mated 1945 for 95 mated 1945 for 95 mated 1945 for 97 mated 7,864 97 mated 7,864 97 mated 7,864 97 mated 7,319 91 mated 11,970 91 mated 11,970 91 mated 6,758 92,950 6418 92,950 6418 92,200 6518 92,200 92,200 91 mated 15,450 10 mated 15,450	Typ	Cases				1	1					1		1
Fight Estimated Population Population 945 for 1945 for 95 mated 1945 for 95 mated 1945 for 95 mated 1945 for 95 mated 1945 for 97 mated 7,864 97 mated 7,864 97 mated 7,864 97 mated 7,319 91 mated 11,970 91 mated 11,970 91 mated 6,758 92,950 6418 92,950 6418 92,200 6518 92,200 92,200 91 mated 15,450 10 mated 15,450	xod	Rate					1			1	1	1	1	
Fight Estimated Population Population Population Population y Regis 45,480 calculating 7,864 y 7,864 y 7,864 y 7,864 y 7,864 y 7,864 y 20,970 orth 20,970 d 20,970 orth 20,970 d 33,610 orth 33,610 n 33,610 d 33,610 eden 35,950 n 35,950 eter 32,200 esfield 15,450 nhall 28,220	Small	Cases		1	1			1			!	- 1		. 1
y Regis y Regis y d hall efter esfield			15 400	005°CF	1,004	33 610	7 319	11 970	0.000	35 950	6.618	32.200	15,450	28,220
DISTRICT Rowley Regis Rugeley Sedgley Stafford Stone Tamworth Tettenhall Tipton Uttoxeter Wednesheld Wednesfield Willenhall	ЩА			:	:	:	:	:	:	:	:	: :	:	:
	diseasib	DISTRICT		Kowiey Kegis			3	1 Jaco	IT TOWNER I	Tinton	Ilttoxeter	Wednesbury	Wednesfield	Willenhall

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	Encephalitis Letharsica		1	1	1	1		1	1	1	1	1
	Poliomyelitis Cases		-	-	1	-	1	1	1		1	-
	Cerebro-spinal Fever Cases		61	1	1	1	1		-	1	1	I
	Puerperal Pyrexia	Rate	0-23	0-06	20.0	0.06	0-13	0.05	0.07		0.23	1
		Cases Rate	5	5	1	61	2	1	1	1	3	1
	Pneumonia		0.64	0.87	0.87	0.58	0-56	0.51	0.20	0.48	0.15	11-0
		Cases Rate	14	27	13	19	6	10	3	8	5	I
	Measles		21-23	4-66	1.68	11.92	7.88	11.56	11.10	7-44	9-63	5 64
		Cases	468	144	25	350	126	227	163	125	126	53
	Erysipelas	Cases Rate Cases Rate Cases Rate	0-45	0-42	1	0.03	0-63	1	0-27	0-12	0.08	0-32
		Cases	10	13	l	1	10	۱	4	61	1	3
	Diphtheria Erysipelas	Rate	1.32	0.62		0.28	1	0.61	0.14	0.60	0.15	1
		Cases	29	19	1	6		12	61	10	5	1
	Whooping Cough	Rate	1.68	1.65	1.14	1.19	4-57	2.65	2.38	2.32	2.22	1.17
		Cases Rate	37	51	17	39	73	52	35	39	29	11
1	Scarlet Fever	Rate	1.27	2.53	1-27	1.38	0.63	I-02	1.84	1 · 49	1.38	2.13
		Cases	28	78	19	45	10	20	27	25	18	20
	Para- Typhoid	Rate	1	0.13	1	1	ľ	I	1	1	1	1
		Cases	1	4	1		1	I			1	1
	Typhoid	Cases Rate Cases Rate Cases Rate Cases Rate	1	I	1	0.03	1	0.05		1	1	1
		Cases	1	1	1	1	1	1			1	1
	Estimated Smallpox Population	Rate	1	1	I	I	1	1	I	1	1	1
		Cases	1	1	1	1	1	1	1		ľ	1
	Estimated Population 1945 for calculating rates		22,040	30,890	14,920	32,710	15,98)	19,640	14,690	16,790	13,080	9,400
			:	:	:	:	:	:	:	:	:	:
	DISTRICT		Cannock	Cheadle	Leek	Lichfield	Newcastle	Seisdon	: tafford	Stone	Tutbury	Uttoxeter

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